

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 26 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 835748 (5)

1. Corporation Name

WRIGHT LINE INC.

Principal Place of Business

100 GOLD STAR BLVD.
WORCESTER MA 01605
US

Mailing Address

P. O. BOX 325
MILWAUKEE WI 53201
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
01/05/1976

3a. Date of Last Report
05/01/1994

4. FEI Number
04-2576375

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TAS
NAME
STREET ADDRESS
CITY - ST - ZIP BULTER WS

1.1 TITLE VT
1.2 NAME Douglas R. Dorszynski
1.3 STREET ADDRESS 13000 W. Silver Spring Dr.
1.4 CITY - ST - ZIP Butler, WI 53007 ☒ Change ☒ Addition

TITLE S
NAME WESCOE, DAVID B.
STREET ADDRESS 13000 W. SILVER SPRING DR
CITY - ST - ZIP BUTLER WI

2.1 TITLE SD
2.2 NAME Anthony W. Rasmuth, III
2.3 STREET ADDRESS 13000 W. Silver Spring Dr.
2.4 CITY - ST - ZIP Butler, WI 53007 ☒ Change ☒ Addition

TITLE D
NAME YENERICH, ORLIN P
STREET ADDRESS 13000 W. SILVER SPRING DR.
CITY - ST - ZIP BULTER WS

3.1 TITLE D
3.2 NAME Andrew G. Kamperer
3.3 STREET ADDRESS 13000 W. Silver Spring Dr.
3.4 CITY - ST - ZIP Butler, WI 53007 ☒ Change ☒ Addition

TITLE VD
NAME FOOTE, JR ROBERT T.
STREET ADDRESS 13000 W. SILVER SPRING
CITY - ST - ZIP BUTLER WI

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE P
NAME HARBERT, DAVID L
STREET ADDRESS 13000 W. SILVER SPRING DR.
CITY - ST - ZIP BUTLER WS

5.1 TITLE P
5.2 NAME Philip T. Burkhardt
5.3 STREET ADDRESS 160 Gold Star Blvd.
5.4 CITY - ST - ZIP Worcester, MA 01606 ☒ Change ☒ Addition

TITLE D
NAME SIM, RICHARD G.
STREET ADDRESS 5231 HIGHWAY 83
CITY - ST - ZIP HARTLAND WI

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Douglas R. Dorszynski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Douglas R. Dorszynski
V. P. and Treasurer 4-12-95

(Date)

(Telephone #)

414-781-6600