

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**Apr 16 1997 8:00am**  
**Secretary of State**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1997**



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

**DOCUMENT # 840698**

**(5)**

1. Corporation Name

**BARBER-COLMAN COMPANY**

Principal Place of Business

**1354 CLIFFORD AVE  
PO BOX 2940  
LOVES PARK IL 61132-2940**

Mailing Address

**1354 CLIFFORD AVE  
PO BOX 2940  
LOVES PARK IL 61132-2940**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

**05/23/1978**

3a. Date of Last Report

**04/30/1996**

4. FEI Number

**36-0772170**

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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D KRIEGER, SANFORD**  
STREET ADDRESS **ONE N.Y. PLAZA**  
CITY - ST - ZIP **NEW YORK NY**

TITLE ☐ DELETE

NAME **D MANN, ROGER**  
STREET ADDRESS **2-4 VICTORIA ST.**  
CITY - ST - ZIP **WINDSOR, ENGLAND**

TITLE ☐ DELETE

NAME **T SCHULER, P G**  
STREET ADDRESS **1354 CLIFFORD AVE**  
CITY - ST - ZIP **LOVES PARK IL**

TITLE ☐ DELETE

NAME **CEO D YURKO, A M**  
STREET ADDRESS **2-4 VICTORIA ST**  
CITY - ST - ZIP **WINDSOR EN**

TITLE ☐ DELETE

NAME **VD SARNEY, G. W**  
STREET ADDRESS **33 COMMERCIAL STREET**  
CITY - ST - ZIP **FOXBORO MA**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Charles M. Valentine*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**CHARLES M. VALENTINE**

Date

Daytime Phone #

**4/8/97 (815) 37-3574**

CR2E034 (9/96)

**BARBER-COLMAN COMPANY  
DIRECTORS AND OFFICERS  
February, 1997**

**DIRECTORS**

|               |   |
|---------------|---|
| S. Krieger    | One New York Plaza, New York, NY 10004-1980                           |
| R. Mann       | Saxon House, 2-4 Victoria St., Windsor,<br>Berkshire, England SL4 1EN |
| J. F. Mueller | 8161 U. S. Route 42 North, Plain City, OH 43064                       |
| G. W. Sarney  | 33 Commercial St., Foxboro, MA 02035-2099                             |
| A. M. Yurko   | Saxon House, 2-4 Victoria St., Windsor,<br>Berkshire, England SL4 1EN |

\* \* \* \* \*

**OFFICERS**

**Chairman and Chief Executive Officer**

A. M. Yurko      Saxon House, 2-4 Victoria St., Windsor, Berkshire, England SL4 1EN

**Executive Vice President**

G. W. Sarney      33 Commercial St., Foxboro, MA 02035-2099

**Executive Vice President**

J. F. Mueller      8161 U. S. Route 42 North, Plain City, OH 43064

**Executive Vice President Finance**

T. Foley      33 Commercial St., Foxboro, MA 02035-2099

**Vice President and President Siebe Environmental Controls Division**

Richard M. Armbrust      1354 Clifford Avenue, Loves Park, IL 61132

**Vice President and General Manager Aerospace and Power Controls Division**

C. D. Spittler      1354 Clifford Avenue, Loves Park, IL 61132

**Vice President and General Manager Industrial Instruments Division**

John Simontacchi      1354 Clifford Avenue, Loves Park, IL 61132

**Directors and Officers - continued**

Secretary, Treasurer & General Counsel

P. G. Schuler 1354 Clifford Avenue, Loves Park, IL 61132

Controller and Assistant Secretary

C. M. Valentine 1354 Clifford Avenue, Loves Park, IL 61132

Assistant Secretary

Jim Bays Saxon House, 2-4 Victoria St., Windsor, Berkshire, England SL4 1EN

Assistant Secretary

K. G. Brake 1354 Clifford Avenue, Loves Park, IL 61132

Assistant Secretary

R.P.A. Coles Saxon House, 2-4 Victoria St., Windsor, Berkshire, England SL4 1EN

Assistant Secretary

P. A. Duffey 1354 Clifford Avenue, Loves Park, IL 61132

Assistant Secretary

W. Geary 1354 Clifford Avenue, Loves Park, IL 61132

Assistant Secretary

S. Krieger One New York Plaza, New York, NY 10004-1980

Assistant Treasurer

Brent Schultz 1354 Clifford Avenue, Loves Park, IL 61132

Assistant Secretary

Mitzi Streid 1354 Clifford Avenue, Loves Park, IL 61132

**Federal Identification Number 36-0772170**

**Incorporation in the State of Delaware**

**3 March 1978**

**Qualified in Illinois**

**24 May 1978**