

FILED
May 20, 2005 08:00 AM
Secretary of State

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 850149 1. Entity Name BOSS MANUFACTURING COMPANY		
Principal Place of Business 221 W. FIRST STREET KEWANEE, IL 61443		Mailing Address 221 W. FIRST STREET KEWANEE, IL 61443
DO NOT WRITE IN THIS SPACE		
		 03092005 No Chg-P CR2E034 (10/03)
		4. FEI Number 36-0827340 Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
5. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		DO NOT WRITE IN THIS SPACE
6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when registering) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE 000000367732 05/20/05-80002-018 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO LANCASTER, J B 221 W 1ST ST KEWANEE, IL 61443	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, BEVERLY J. 221 WEST FIRST STREET KEWANEE, IL	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.		
SIGNATURE: <u>J. B. Lancaster</u> CFO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>3/9/05</u> <u>309/852/2131</u> Date Daytime Phone 3