

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2005 08:00 AM
Secretary of State

DOCUMENT # 857242 1. Entity Name NILFISK-ADVANCE, INC.	
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Principal Place of Business 14600-21ST AVE., N. PLYMOUTH, MN 55447	Mailing Address 14600-21ST AVE., N. PLYMOUTH, MN 55447-3408
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03102005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 41-0116040	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

8. 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.

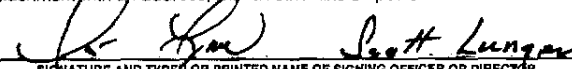
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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	000000272745 03/22/05-80016-012 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSM CAROTENUTO, JOSEPH P SR. 14600 21ST AVE. NORTH PLYMOUTH, MN 554473408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MOLIN, JOHAN SOGNEVEJ 25 BRONDBY, DE DK-265
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO DOERR, LAWRENCE M 14600 21ST AVE N PLYMOUTH, MN 554473408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KNUDSEN, CHRISTIAN 14600 21ST AVE. N. PLYMOUTH, MN 554473408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STSV LUNGER, SCOTT 14600 21ST AVE N PLYMOUTH, MN 554473408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MICHELSEN, CLAUS SOGNEVE 25 BRONDBY, DE DK-265

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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 an address, with all other like empowered.

SIGNATURE:  3/10/05 763.745.3662
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #