

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007202

FILED
Feb 13, 2004
Secretary of State

Entity Name: KUHN FARM MACHINERY INC.

Current Principal Place of Business:

5390 EAST SENECA STREET
P O BOX 840
VERNON, NY 13476

New Principal Place of Business:

Current Mailing Address:

5390 EAST SENECA STREET
P O BOX 840
VERNON, NY 13476

New Mailing Address:

FEI Number: 16-1075665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SIEBERT, MICHEL
Address: 4 IMPASSE DES FABRIQUES
City-St-Zip: 67700 SAVERNE, FRANCE,

Title: TD () Delete
Name: MERTZ, MARC
Address: 4 IMPASSE DES FABRIQUES, BP60
City-St-Zip: 67700 SAVERNE, FRANCE,

Title: P () Delete
Name: RIEGER, ROLAND
Address: 4 IMPASSE DES FABRIQUES
City-St-Zip: 67700 SAVERNE, FRANCE,

Title: VAS () Delete
Name: KRIER, THIERRY
Address: 5390 EAST SENECA STREET
City-St-Zip: NEW YORK, NY 134760840

Title: VD () Delete
Name: STEINER, ROLAND
Address: 4 IMPASSE DES FABRIQUES
City-St-Zip: 67700 SAVERNE, FRANCE,

Title: D () Delete
Name: TSCHUDIN, HUGO
Address: 215 RIVER VALE RD.
City-St-Zip: RIVER VALE, NJ 07675

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THIERRY KRIER

VAS

02/13/2004

Electronic Signature of Signing Officer or Director

Date