

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90033 036 ***150.00

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1. Entity Name
IRWIN TELESCOPIC SEATING COMPANY



Principal Place of Business
**PO BOX 320
ALTAMONT, IL 62411**

Mailing Address
**PO BOX 320
ALTAMONT, IL 62411**

000007433

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01232006 Chg-P CR2E034 (11/05)

4. FEI Number
37-1173073

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEVE WARD AND ASSOCIATES
4424 NORTHWEST 13TH ST., STE A4
GAINESVILLE, FL 32609**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VT
WALDO, DOUG
R.R. 1 BOX 39
ST ELMO, IL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
CONNER, RUSTY
8898 N. 650TH ST
ALTAMONT, IL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
IRWIN, EARLE S
1860 LAKE DRIVE
GRAND RAPIDS, MI 49506** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WEAKLEY, ROBERT E
4690 MORNINGSIDE SE
KENTWOOD, MI 49512** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIRECTOR
IRWIN, EARLE S
1860 LAKE DRIVE
GRAND RAPIDS, MI 49506** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
CONRAD, ERIC
15872 N BLUEBIRD DR
EFFINGHAM, IL 62401** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREASURER
BROWN, VALERIE
810 S MAIN ST
ALTAMONT, IL 62411** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Valerie Brown **VALERIE BROWN**

Date

01/20/06 618-483-6157

Daytime Phone #