2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001963

Entity Name: CLARK MATERIAL HANDLING COMPANY

FILED Apr 15, 2009 Secretary of State

Current Pr	incipal Place o	of Business:	New Prince	New Principal Place of Business:		
700 ENTERPRISE DRIVE LEXINGTON, KY 40510						
Current Mailing Address:			New Maili	New Mailing Address:		
700 ENTERPRISE DRIVE LEXINGTON, KY 40510						
FEI Number: 54-2091806 FEI Number Applied For () FEI Nu			FEI Number Not Appl	mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US						
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			t	Da	ate	
Election Cam	paign Financing 1	Frust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () C LAWRENCE, DEN 700 ENTERPRISE LEXINGTON, KY	E DRIVE	Title: Name: Address: City-St-Zip:	() Change ()	Addition	
Title: Name: Address: City-St-Zip:	V () C GROSSMAN, MIC 700 ENTERPRISE LEXINGTON, KY	E DRIVE	Title: Name: Address: City-St-Zip:	() Change ()	Addition	
Title: Name: Address: City-St-Zip:	REE, HOWARD	Delete BLVD., SUITE 250 CA 90010	Title: Name: Address: City-St-Zip:	T (X) Change () HONG, HEAYOUNG 700 ENTERPRISE DRIVE LEXINGTON, KY 40510	Addition	
Title: Name: Address: City-St-Zip:	S () E HONG, HEAYOUN 700 ENTERPRISE LEXINGTON, KY	E DR.	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	D () D BAIK, SUNG HAK 700 ENTERPRISE LEXINGTON, KY	E DR.	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	D () C SOO BAIK, BYUN 700 ENTERPRISE LEXINGTON, KY	E DRIVE	Title: Name: Address: City-St-Zip:	() Change ()	Addition	
Statutes. 11	further certify that	rmation supplied with this filing at the information indicated on ave the same legal effect as if r	this report or suppl	emental report is true and	d accurate and that my	

SIGNATURE: MICHAEL J GROSSMAN VP 04/15/2009

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.