2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006005

Entity Name: R&M MATERIALS HANDLING, INC.

FILED Mar 13, 2007 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	WAY BOULEV ELD, OH 45502					
Current Mailing Address:			New Mailing Address:			
	WAY BOULEV ELD, OH 45502					
FEI Number:	34-1404063	FEI Number Applied For ()	El Number Not Appli	Olicable () Certificate of Status Desired ()		
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:		
1201 HAYS	TION SERVICI STREET SEE, FL 3230					
The above in the State		ubmits this statement for the purpo	ose of changing its	its registered office or registered agent, or both,		
SIGNATUR	E:					
	Electroni	Signature of Registered Agent		Date		
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:		ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () I SOTHARD, TOM 4401 GATEWAY SPRINGFIELD, O		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T () I ROTH, LISA M 4501 GATEWAY SPRINGFIELD, O		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () I PAKKILA, PEKK RUUNUNMYLLYI HAMEENLINNA,	NTIE 13	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	P () I FIORINO, FABIO 4501 GATEWAY SPRINGFIELD, G	BOULEVARD	Title: Name: Address: City-St-Zip:	P (X) Change () Addition VANDEGRIFT, JAMES B 4501 GATEWAY BOULEVARD SPRINGFIELD, OH 45502		
Title: Name: Address: City-St-Zip:	V () I VANDEGRIFT, JA 4501 GATEWAY SPRINGFIELD, G	BOULEVARD	Title: Name: Address: City-St-Zip:	V (X) Change () Addition SHUMAKER, GUY 4401 GATEWAY BOULEVARD SPRINGFIELD, OH 45502		
Title: Name: Address: City-St-Zip:	S () I D'AMBROSI, BEI 4401 GATEWAY SPRINGFIELD, C	BOULEVARD	Title: Name: Address: City-St-Zip:	()Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LISA M. ROTH T 03/13/2007