

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003509

FILED
Apr 24, 2008
Secretary of State

Entity Name: CLARCOR AIR FILTRATION PRODUCTS, INC.

Current Principal Place of Business:

3807 BISHOP LANE
LOUISVILLE, KY 40232

New Principal Place of Business:

Current Mailing Address:

840 CRESENT CENTRE DRIVE
600
FRANKLIN, TN 37067

New Mailing Address:

FEI Number: 61-0658180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: LARSON, RICHARD
Address: 3807 BISHOP LN
City-St-Zip: LOUISVILLE, KY 40232

Title: VTD () Delete
Name: KLEIN, BRUCE A
Address: 840 CRESCENT CENTRE DRIVE STE 600
City-St-Zip: FRANKLIN, TN 37067

Title: VDS () Delete
Name: WOLFSON, RICHARD
Address: 840 CRESCENT CTR DR STE 600
City-St-Zip: FRANKLIN, TN 37067

Title: D () Delete
Name: JOHNSON, NORMAN
Address: 840 CRESCENT CTR DR STE 600
City-St-Zip: FRANKLIN, TN 37067

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:

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE A KLEIN

VTD

04/24/2008

Electronic Signature of Signing Officer or Director

Date