## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000006197

Entity Name: SPECIALTY MOTORS OPERATIONS, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
402 EAST HAVEN STREET EATON RAPIDS, MI 48827						
Current Mailing Address:			New Mailir	New Mailing Address:		
	HAVEN STREE PIDS, MI 4882					
FEI Number:	26-1424852	FEI Number Applied For ( )	FEI Number Not Appli	Certificate of Status Desired ( )		
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:		
1200 SOUT	ORATION SYS H PINE ISLAN DN, FL 33324					
The above in the State		ubmits this statement for the purp	oose of changing it	its registered office or registered agent, or both,		
SIGNATUR	E:					
	Electronic	Signature of Registered Agent		Date		
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ALGER, MIKE	Delete NTER CIRCLE, SUITE 600 L 33486	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	FINNIGAN, DAVII	ITER CIRCLE, SUITE 600	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	CALHOUN, KEVII	ITER CIRCLE, SUITE 600	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VPAS () E HALLANGER, DA 402 EAST HAVEN BATON RAPIDS,	N ST	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition RYDER, MARC 402 EAST HAVEN ST BATON RAPIDS, MI 48827		
Title: Name: Address: City-St-Zip:	AT () E HALLANGER, DA 402 EAST HAVEN BATON RAPIDS,	N ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	AS ()[ WEBB, CASEY ( 402 EAST HAVEN BATON RAPIDS,	N ST	Title: Name: Address: City-St-Zip:	AS (X) Change ( ) Addition AULT, STEVEN CFO 402 EAST HAVEN ST BATON RAPIDS, MI 48827		
Statutes. If	urther certify th	at the information indicated on the	nis report or supple	or the exemption stated in Chapter 119, Florida lemental report is true and accurate and that my hat I am an officer or director of the corporation or		

SIGNATURE: STEVEN AULT AS

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.