

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000005207

Entity Name: STATE INDUSTRIES, INC.

FILED
Apr 06, 2011
Secretary of State

Current Principal Place of Business:

500 TENNESSEE WALTZ PARKWAY
ASHLAND CITY, TN 37015

New Principal Place of Business:

Current Mailing Address:

PO BOX 245008
ATTN: TAX DEPT.
MILWAUKEE, WI 532249508 US

New Mailing Address:

FEI Number: 62-0491014 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: PD
Name: RAJENDRA, AJITA G
Address: 500 TENNESSEE WALTZ PARKWAY
City-St-Zip: ASHLAND CITY, TN 37015

Title: TD
Name: KITA, JOHN J
Address: 11270 WEST PARK PLACE
City-St-Zip: MILWAUKEE, WI 53224

Title: ASD
Name: MACIOLEK, KENNETH J
Address: 11270 WEST PARK PLACE
City-St-Zip: MILWAUKEE, WI 53224

Title: S
Name: STERN, JAMES F
Address: 11270 WEST PARK PLACE
City-St-Zip: MILWAUKEE, WI 53224

Title: V
Name: WARREN, DAVE
Address: 500 TENNESSEE WALTZ PARKWAY
City-St-Zip: ASHLAND CITY, TN 37015

Title: VD
Name: LAUBER, CHARLES T
Address: 500 TENNESSEE WALTZ PARKWAY
City-St-Zip: ASHLAND CITY, TN 37015

I hereby 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 all other like empowered.

SIGNATURE: JOHN KITA

TD

04/06/2011

Electronic Signature of Signing Officer or Director

Date