

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2004 08:00 AM
Secretary of State

DOCUMENT # F93000001484 1. Entity Name GENCA CORPORATION	
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Principal Place of Business C/O GENCA CORP. 4 TESSENEER DRIVE HIGHLAND HEIGHTS, KY 41076 US	Mailing Address C/O GENERAL CABLE CORP. 4 TESSENEER DR. HIGHLAND HEIGHTS, KY 41076 US
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01222004 No Chg-P CR2E034 (10/03)

4. FEI Number 22-2885883	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

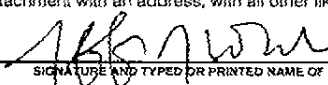
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000111819 04/13/04-80036-005 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KENNY, GREGORY B 4 TESSENEER DR. HIGHLAND HEIGHTS, KY 41076
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WHELAN, JEFFREY J 4 TESSENEER DRIVE HIGHLAND HEIGHTS, KY 41076
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SIVERD, ROBERT J 4 TESSENEER DRIVE HIGHLAND HEIGHTS, KY 41076
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD VIRGULAK, CHRISTOPHER F 4 TESSENEER DRIVE HIGHLAND HEIGHTS, KY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Jeffrey J. Whelan** **4/2/04** **859 572 8000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #