FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F93000001947 (1)**

1. Corporation Name

FREUDENBERG BUILDING SYSTEMS, INC.

Principal Place of Business

94 GLENN STREET
LAWRENCE MA 01843

Mailing Address

94 GLENN STREET
LAWRENCE MA 01843

3. Date Incorporated or Qualified **04/21/1993**

3a. Date of Last Report **03/14/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City, & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number **06-1186935** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD ☐ DELETE	1 TITLE	☐ Change ☐ Addition
NAME	SCHLITT, JOCHEN	2 NAME	
STREET ADDRESS	FREUDENBERG BAUSYSTEME, POSTFACH 6940	3 STREET ADDRESS	
CITY-ST-ZIP	WEINHEIM GE	4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	2 TITLE	☐ Change ☐ Addition
NAME	BERBNER, HEINRICH	2 NAME	
STREET ADDRESS	FREUDENBERG BAUSYSTEME, POSTFACH 6940	3 STREET ADDRESS	
CITY-ST-ZIP	WEINHEIM GE	4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3 TITLE	☐ Change ☐ Addition
NAME	HECKEL, KLAUS	3 NAME	
STREET ADDRESS	FREUDENBERG BAUSYSTEME, POSTFACH 6940	3 STREET ADDRESS	
CITY-ST-ZIP	WEINHEIM GE	4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4 TITLE	☐ Change ☐ Addition
NAME	SIEMS, VOLKER	4 NAME	
STREET ADDRESS	27 ROYAL CREST APTS	4 STREET ADDRESS	
CITY-ST-ZIP	NORTH ANDOVER MA	4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	5 TITLE	☐ Change ☐ Addition
NAME	MCAULIFFE, E. TIMOTHY	5 NAME	
STREET ADDRESS	200 PARK AVENUE	5 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	5 CITY-ST-ZIP	
TITLE	☐ DELETE	6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 CITY-ST-ZIP	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or added to the report with my address.

SIGNATURE: C. Siems Volker Siems, President 2/8/96 508/689-0530

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone