

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 # F93000003720 (0)

1. Corporation Name

RITTAL CORP.



Principal Place of Business

ONE RITTAL PLACE
SPRINGFIELD OH 45504

Mailing Address

ONE RITTAL PLACE
SPRINGFIELD OH 45504

3. Date Incorporated or Qualified

08/16/1993

3a. Date of Last Report

02/06/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

31-1029409

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

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title if applicable:

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PTD
WAGNER, HANS J
ONE RITTAL PLACE
SPRINGFIELD OH

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
FREUND, HAROLD
ONE RITTAL PLACE
SPRINGFIELD OH

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
HEMMANN, FOLKER
ONE RITTAL PLACE
SPRINGFIELD OH 45504

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
WEIST, JAMES
ONE RITTAL PLACE
SPRINGFIELD OH 45504

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
BORABABY, GEORGE
2550 M STREET, N.W.
WASHINGTON DC

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

CD
LOH, FRIEDHELM
AUF DEM STEUTZELBERG
D-35745 HERBORN, GERMANY

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

D
NORBERT MUELLER
AVF DEM STEVTZELBERG
D-35745 HERBORN GERMANY

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

V
MICHAEL COOK
ONE RITTAL PLACE
SPRINGFIELD OHIO

☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harold Freund

2/26/96

Date

(513) 399-0500

Daytime Phone #

CR2E034 (12/95)