## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 08 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9300004354 (7)

ROUSH PRODUCTS COMPANY, INC.

Principal Place of Business Mailing Address TAX DEPT 1000 WENIG ROAD NE 200 SOUTH SIXTH ST **CEDAR RAPIDS IA 52402-4514** MINNEAPOLIS MN 55402 3. Date Incorporated or Qualified 3a. Date of Last Report 09/27/1993 04/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 TAX DEPT 08X3 94-1577269 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 200 S, 6th Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 MINNEA POLIS 'nΝ 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 55402 Yes 24 25 29 Florida Statutes 30 HENNEPIN 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 R4 City 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE 1.1 7171,18 Change Addition TITLE OLIVER, PAUL NAME 1.2 NAME 200 SOUTH SIXTH ST STREET ADDRESS 1.3 STREET ADDRESS MINNEAPOLIS MN CITY-ST-ZIP 1.4 CHY-ST-ZIP DELETE ☐ Change Addition TITI F 2.1 TITLE LEAVITT, WILLIAM 2.2 NAME MURRAY, G-REG 2000 South Sixth St STREET ADDRESS 23 STREET ADDRESS 200 SOUTH MINNEAPOLIS MN MINNEAPOL 55402 CITY-ST-ZIP 2.4 CHY-\$1-ZIP 🔽 DELETE Addition TITLE 31 THLE NAME CLEIN, BARBARA 3.2 NAME MINTON, CATHLEEN 200 SOUTH SIXTH 51 55402 200 SOUTH SIXTH ST STREET ADDRESS 3 3 STREET ADDRESS MINNEAPOLIS MN CITY-ST-ZIP 3.4. C(1Y - \$1 - Z(P DELETE Addition TITLE 4.1 THLE POPPELE, DONALD R. JOHNSON, LESLIE NAME 4. 2 NAME s, bth STI 200 SOUTH SIXTH ST STREET ADDRESS 4.3 STREET ADDRESS MINNEAPOLIS MN 402 CITY-ST-ZIP MINNEAPOLLS MN 4.4 CITY - \$1 - ZIP DELETE Addition TITLE 5.1 1111.6 NAME 5.2 NAME

14. I do hereby certify that the information supplied with his 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 annual report or supplymental arrival report is fine 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 occiver or fursted employeed 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 organ anactiment with an address

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - \$1 - 7IP

6.1 TITLE

**6.2 NAME** 

DELETE

NOMETHER. STONE STONE DELLE CHIEFE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME