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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9300004586 (4)

DENISON HYDRAULICS, INC.

								<u> </u>
Principal Place of Business Mailing Address						s saeriam sisa imiaa niiri mairi aarii aarii aarii aarii atibi atibi arii iabie arii 1001		
14249 INDUST MARYSVILLE C	RIAL PARKWAY DH 43040		14249 INDUSTRIAL PARKWAY MARYSVILLE OH 43040-9504					
						3. Date Incorporated or Qualified	3a. Date of La	ast Report
						10/06/1993	01/25/199)6
	Place of Business	2a. Mailing	Address			4. FEI Number		Applied For
21	L at	26	- N U - 1 -			76-0085919		Not Applicable
Suite, Apt	#, etc	} 1	Suite Apt. #, etc.			5. Certificate of Status Desired	1 1	75 Additional
City & Stal	le:	27 City & 9	City & State					e Required
23		<u>├</u>	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Zip Country		Zip Cou		/	This corporation has liability for intangible tax under s. 199.032,		
24	25 29		•	30		Florida Statutes Yes No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM					Name			
1200 SOUTH PINE ISLAND ROAD				82	Street Address (P.O. Box Number is Not Acceptable)			
PLA	NTATION FL 33324						***************************************	
				83				
				84	City		p 85	Zip Code
11 Pursuant	to the provisions of Sections	607 0502 and 607 1509	Etorido Statuto	the above	a parned a	orporation submits this statement for the	FL °°	
i nince or i	registered agent, or both, in tamination agent (the State of Florida, Such	changa was a	utharized h	v the corno	oration's board of directors. I hereby acce	pt the appointmen	it as registered
SIGNATURE								
40	Signature, typed or printed name of re		(NO16		ent signature re	quired when reinstating)	DATE	
12.	CD	ERS AND DIRECTORS	DELETE	13.	Т	ADDITIONS/CHANGES TO OFFICE		
NAME	KEITH, COLIN	,	Decem	1.2 NAME			L. Chai	nonicon LL Adoleon
STREET ADDRESS	767 THIRD AVENUE				ADDRESS			
CITY-ST-7#P	NEW YORK NY 10017			1.3 STREE				
TITLE	PT	W//W/	DELETE	2.1 TITLE	SI-ZIF		☐ Char	nge Addition
NAME	WEIR, DAVID L			2.2 NAME				ago riddition
STREET ADDRESS	14249 INDUSTRIAL PAI	RKWAY			ADDRESS			
CITY-ST-ZIP	MARYSVILLE OH	•		2. 4 CITY-				
TITLE	D		DELETE	3.1 TITLE			☐ Char	nge Addition
NAME	BRAG, ANDRES			3.2 NAME		**	45°)	Į
STREET ADDRESS	650 MADISON AVE			3.3 STREE	ADDRESS			j
CITY-ST-ZIP	NEW YORK NY 10022			3.4. CITY-	ST-ZIP			
TITLE	D	l	DELETE	4.1 TITLE			☐ Char	nge 🔲 Addition
NAME	GITTES, HARRY	_		4. 2 NAME				
STREET ADDRESS	650 MADISON AVENUE	•			ADDRESS			
CITY - ST - ZIP	NEW YORK NY		DELETE	4 4 CITY - :	ST-2IP			
TOTLE	S AUTOCOUR ANTUR		ULLE IE	5 1 TITLE			L Char	nge 🔲 Addition
NAME STREET AREAS OF	MUSTACCHIO, ANTHO			5 2 NAME				
STREET ADDRESS	14249 INDUSTRIAL PAI	MNYAT			ADDRESS			
CITY - ST - ZIP TITLE	MAYSVILLE OH		DELETE	5.4 CITY - 1	ST - ZIP		[] a.	nga Addisia
NAME		Ļ	□ PETE E	6 1 TITLE			L Char	nge 🗌 Addition
STREET ADDRESS				6.2 NAME	ADDRESS			
					ADDRESS			
CITY - ST - ZIP	1			6.4 CITY- 5	11-7P I			l

64 CITY-ST-ZIP

SIGNATURE:

14. I do 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 annual report or suppliemental 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 it changed or on an attachment with a address.

FILED

Jan 16 1997 8:00am

Secretary of State

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