

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005348

FILED  
Feb 13, 2009  
Secretary of State

Entity Name: PRODUCT FABRICATION SERVICE CORPORATION

**Current Principal Place of Business:**

1507 MATT PASS  
COTTAGE GROVE, WI 535278962 US

**New Principal Place of Business:**

**Current Mailing Address:**

1507 MATT PASS  
COTTAGE GROVE, WI 535278962 US

**New Mailing Address:**

FEI Number: 39-1301594

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 N. MAGNOLIA ST.  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MORRISON, VIRDEN  
Address: 10019 RIDGEWOOD DR  
City-St-Zip: MINOCQUA, WI 54548

Title: D ( ) Delete  
Name: TRAMBURG, ROBERT S  
Address: 8385 S KOLLATH RD  
City-St-Zip: VERONA, WI 53593

Title: P ( ) Delete  
Name: SLIFKA, MICHAEL J P.E.  
Address: 3221 CONSERVANCY LANE  
City-St-Zip: MIDDLETON, WI 53562

Title: V ( ) Delete  
Name: ROTHMAN, JAMES A  
Address: 799 CENTRAL AVE  
City-St-Zip: DEERFIELD, WI 53531

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA R ANGELL

CFO

02/13/2009

Electronic Signature of Signing Officer or Director

Date