## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000000430

Entity Name: MANITOWOC MEC, INC

FILED Apr 25, 2006 Secretary of State

| •   |  |                                |   |   |  |
|---|--|--------------------------------|---|---|--|
| Current Principal Place of Business:        |  |                                | New Principal Place of Business:            |   |  |
|   | TH 44TH STR<br>/OC, WI 5422                        |                                |   |   |  |
| Current Mailing Address:                    |  |                                | New Mailing Address:                        |   |  |
| P.O. BOX<br>MANITOW                         | 66<br>/OC, WI 5422                                 | 10066 US                       |   |   |  |
| FEI Number                                  | : 39-1775033                                       | FEI Number Applied For ( )     | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )           |  |
| Name and                                    | Address of (                                       | Current Registered Agent:      | Name and Address of                         | of New Registered Agent:                    |  |
| 1200 SOU                                    | PORATION SY<br>TH PINE ISLA<br>ION, FL 33324       | ND ROAD                        |   |   |  |
|   | e named entity<br>e of Florida.                    | submits this statement for the | purpose of changing its registere           | d office or registered agent, or both,      |  |
| SIGNATUI                                    | RE:  |                                |   |   |  |
|   | Electro  | nic Signature of Registered Ag | ent   | Date  |  |
| Election Ca                                 | mpaign Financin                                    | g Trust Fund Contribution ( ). |   |   |  |
| OFFICERS AND DIRECTORS:                     |  |                                | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D (<br>GROWCOCK,<br>2400 SOUTH 4<br>MANITOWOC,     | 4TH STREET                     | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | TD (<br>LAURINO, CAF<br>2400 SOUTH 4<br>MANITOWOC, | 4TH STREET                     | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | SD (<br>JONES, M.D.<br>2400 SOUTH 4<br>MANITOWOC,  |                                | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                       |  |
| Title:<br>Name:                             | P (<br>TELLOCK, GLI                                | ) Delete<br>EN E               | Title:<br>Name:                             | ( ) Change ( ) Addition                     |  |

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: MAURICE JONES SEC 04/25/2006

2400 SOUTH 44TH STREET

MANITOWOC, WI 54220

Address:

City-St-Zip: