2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# F94000000778

Entity Name: WEIR SLURRY GROUP, INC.

Current Principal Place of Business:

2701 S. STOUGHTON RD
MADISON, WI 53716 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7610
MADISON, WI 53707

New Mailing Address:

FEI Number: 39-1147488 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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:	SMITH, SCOT	
Address:	4625 DOVEWOOD LANE	
City-St-Zip:	SYLVANIA, OH 43560 US	
Title:	P	(X) Delete
Name:	MARTIN, WARREN	
Address:	8979 SHERINGHAM DRIVE	
City-St-Zip:	ROSCOE, IL 61080 US	
Title:	S	( ) Delete
Name:	LASKY, JOHN T	
Address:	5706 HEMPSTEAD ROAD	
City-St-Zip:	MADISON, WI 53711 US	
Title:	D	(X) Delete
Name:	MARTIN, WARREN	
Address:	14842 PRAIRIE WAY	
City-St-Zip:	SOUTH BELOIT, IL 61080 US	
Title:	D	(X) Delete
Name:	CARUSO, JOHN	
Address:	3762 RAINTREE ROAD	
City-St-Zip:	SUN PRAIRIE, WI 53590 US	
Title:	T	(X) Delete
Name:	CARUSO, JOHN	
Address:	3762 RAINTREE ROAD	
City-St-Zip:	SUN PRAIRIE, WI 53590 US	

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:	
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: JOHN T LASKY S 04/30/2009

Electronic Signature of Signing Officer or Director — Date