

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90001 003 ***550.00

DOCUMENT # F94000003890



1. Entity Name
HASTINGS MANUFACTURING COMPANY

Principal Place of Business

**325 N. HANOVER
HASTINGS, MI 49058**

Mailing Address

**325 N. HANOVER
HASTINGS, MI 49058**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07162004

Chg-P

CR2E034 (10/03)

4. FEI Number

38-0633740

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TUBBERGEN, STANLEY C
2400 16 ST. NE, UNIT 112
POMPANO BEACH, FL 33062**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DV** ☐ Delete
NAME **GUENTHER, JEFFREY P**
STREET ADDRESS **1029 S MICHIGAN AVE**
CITY-ST-ZIP **HASTINGS, MI 49058**

TITLE **DV** ☐ Delete
NAME **JOHNSON, ANDREW F**
STREET ADDRESS **1006 W. CLINTON STREET**
CITY-ST-ZIP **HASTINGS, MI 49058**

TITLE **DV** ☐ Delete
NAME **JOHNSON, MARK R**
STREET ADDRESS **11155 HASTINGS POINT ROAD**
CITY-ST-ZIP **MIDDLEVILLE, MI 49333**

TITLE **DV** ☒ Delete
NAME **KOOP, DALE W**
STREET ADDRESS **577 INDIAN HILLS DRIVE**
CITY-ST-ZIP **HASTINGS, MI 49058**

TITLE **DV** ☒ Delete
NAME **BENNETT, MONTY C**
STREET ADDRESS **1706 S. BROADWAY**
CITY-ST-ZIP **HASTINGS, MI 49058**

TITLE **CS** ☐ Delete
NAME **ZWIERNIKOWSKI, RICHARD L JR**
STREET ADDRESS **929 S JEFFERSON**
CITY-ST-ZIP **HASTINGS, MI 49058**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

R. ZWIERNIKOWSKI

7/16/04

(269) 945-2491