
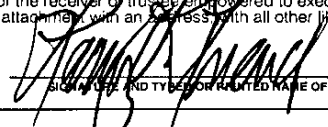


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90152 001 ***150.00

DOCUMENT # F95000001145 1. Entity Name WERNER CO.					
Principal Place of Business 93 WERNER ROAD GREENVILLE, PA 16125-9499			Mailing Address 93 WERNER ROAD GREENVILLE, PA 16125-9499		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
4. FEI Number 25-1754435				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DP	<input checked="" type="checkbox"/> Delete	TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HEINER, DENNIS G		NAME	RICHMAN, STEVEN P.	
STREET ADDRESS	93 WERNER ROAD		STREET ADDRESS	93 WERNER ROAD	
CITY-ST-ZIP	GREENVILLE, PA 161259499		CITY-ST-ZIP	GREENVILLE, PA 16125	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SULLIVAN, THOMAS J		NAME		
STREET ADDRESS	93 WERNER ROAD		STREET ADDRESS		
CITY-ST-ZIP	GREENVILLE, PA 16125		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOLOT, HOWARD L		NAME		
STREET ADDRESS	93 WERNER ROAD		STREET ADDRESS		
CITY-ST-ZIP	GREENVILLE, PA 16125		CITY-ST-ZIP		
TITLE	DC	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WERNER, DONALD M		NAME		
STREET ADDRESS	93 WERNER ROAD		STREET ADDRESS		
CITY-ST-ZIP	GREENVILLE, PA		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STADLER, CHRISTOPHER J		NAME		
STREET ADDRESS	93 WERNER ROAD		STREET ADDRESS		
CITY-ST-ZIP	GREENVILLE, PA 161259499		CITY-ST-ZIP		
TITLE	VTCF	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIEND, LARRY V		NAME		
STREET ADDRESS	93 WERNER ROAD		STREET ADDRESS		
CITY-ST-ZIP	GREENVILLE, PA 16125		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: 			Larry V. Friend		
<small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			04-22-05 (724) 588-8600 <small>Date Daytime Phone #</small>		