

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004702

FILED
Apr 28, 2006
Secretary of State

Entity Name: WALKER STAINLESS EQUIPMENT COMPANY, INC.

Current Principal Place of Business:

625 STATE STREET
NEW LISBON, WI 53950

New Principal Place of Business:

Current Mailing Address:

250 SOUTH CLINTON STREET
SUITE 201
SYRACUSE, NY 13202

New Mailing Address:

FEI Number: 39-1830742 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.
1201 HAYS STREET, STE 105
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: P () Delete
Name: HIGH, TIMOTHY
Address: 801 KINGSLEY STREET
City-St-Zip: WINSTED, MN 55395 US

Title: VP () Delete
Name: LOWE, CAROL P
Address: 13925 BALLANTYNE CORPORATE PLACE
City-St-Zip: CHARLOTTE, NC 28277

Title: SD () Delete
Name: FORD, STEVEN J
Address: 250 SOUTH CLINTON STREET, STE 201
City-St-Zip: SYRACUSE, NY 13202

Title: D () Delete
Name: MCKINNISH, RICHMOND D
Address: 13925 BALLANTYNE CORPORATE PLACE
City-St-Zip: CHARLOTTE, NC 28277

Title: D () Delete
Name: LOWE, CAROL P
Address: 13925 BALLANTYNE CORP. PLACE, STE. 400
City-St-Zip: CHARLOTTE, NC 28277

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:

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.

SIGNATURE: STEVEN J. FORD

SD

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date