| 2004 FOR PROFIT CORPORATION ANNUAL REPORT | | | | | FILED May 03, 2004 8:00 am Secretary of State | | | | |
|---|---|---|--|---|--|--|---|--|--|
| DOCUMENT # F96000006452 1. Entity Name ROCKWELL INTERNATIONAL CORPORATION | | | 05-03-2004 91037 045 ***150.00 | | | | | | |
| 777 S. WISCONSIN AVE STE 1400 | | ailing Address 77 S. WISCONSIN AVE TE 1400 IILWAUKEE, WI 53202 | | | | | | | |
| Ē | O NOT WRITE II | N THIS SPA | CE | 04212004 4. FEI Numb 25-124 | No Chg-P | CR2E034 (10 | | | |
| 1200 SOU | 6. Name and Address of Current Regis PORATION SYSTEM TH PINE ISLAND ROAD ION, FL 33324 | tered Agent | | 11 A. A. A. | NOT W THIS SP | | | | |
| the obligat | named entity submits this statement for the lons of registere® agent. Signature, typed of printed name of registered agent and title E NOWIII FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00 | · · · · · | ed Agent signature required | · · · | oth, in the State of Flo | rida. I am familiai DATE | with, and accept | , , , , | |
| · · · | | | | | | | | | |
| • 10. TITLE NAME STREET ADDRESS CITY - ST- 2IP | OFFICERS AND DIRE PD CALISE, WILLIAM J JR 777 E. WISCONSIN AVE., STE 1400 MILWAUKEE, WI 53202 | CTORS | | | | | | n an annual sinn anna ann | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VPAS MILLER, JOHN M 777 E. WISCONSIN AVE., STE 1400 MILWAUKEE, WI 53202 | | | | | | | n an ruman in an the second states was | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPS BALISTRERI, KAREN A 777 E WISCONSIN AVE STE 1400 MILWAUKEE, WI 53202 | | | | NOT W | | | No 1 | |
| TITLE NAME STREET ADORESS CITY - ST - ZIP | AT ETZEL, STEVEN 777 E. WISCONSIN AVE., STE 1400 MILWAUKEE, WI 53202 | | | IN | THIS SP | ACE | | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | AT COPPINS, KENT G 777 E. WISCONSIN AVE., STE 1251 MILWAUKEE, WI 53202 | | and the second | na sina si si | | • | | | |
| TITLE NAME STREET ADDRESS CITY; ST-ZIP | T MALLANY, THOMAS J 777 E. WISCONSIN AVE. STE. 1400 MILWAUKEE, WI: 53202 | | (((((((((((((((((((| n na sta Angel gele gele Santanan Angel Markage gele Angel Markage gele | | s S S S S S S S S S S S S S S S S S S S | د همه چر د میچ دهند میشود. در معاد از میچود میشاند میشود مربوبا از میچود میشاند میچود | | |
| of the co | certify that the information supplied with this l on this report or supplemental report is true poration or the receiver or trustee empowere or on an attachment with an appress, with a | and accurate and that my sign d to execute this report as requ | emption stated in Se ature shall have the Jired by Chapter 60 | ection 119.07(3) same legal effe 7, Florida Statut |)(i), Florida Statutes. I ct as if made under c es; and that my name | further certify tha bath; that I am an appears in Block | t the information officer or director < 10 or Block 11 if | | |
| SIGNAT | | Kent | G. Coppins | , Asst. | Treasurer 4-27-04 | 414-2 Daytime P | 12-5493 | | |
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