2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT#

F96000006452

1. Entity Name

ROCKWELL INTERNATIONAL CORPORATION



Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91420 027 ***150.00

FILED

	ce of Business	Mailing Address		-					
777 S. WISC	ONSIN AVE	777 S. WISCONSIN AVE							
STE 1400 MILWAUKEE	Wi 53202	STE 1400 MILWAUKEE WI 53202			I CONTROL MIN TALLA ALCHI NOVILLE	88::: 88::: PE(:: 48		4111E 1(8) 144:	
MILHRONCE	·	MILTINOILL III 30202							
2. Principal Place of Business 777 E.W.SCONSIN AVENUE 717 E.W.SCO			MSIN ARME		6 1806/86 8/18 18/18 80/11 1 	EBISI BESIS BOSSI OBI	il a s ilili giga t	01110 till 1001	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES					
City & State Mility (1) Kel W1		City & State Milway KG, WI		4. FEI Number 25-1249225		_ 	oplied For		
Zip	Country	Zip_	Country USA-			6	8.75 Add	ot Applicable	
532		53202	USH-		5. Certificate of Status Desired	F	ee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
C T CORPORATION SYSTEM				Name					
1200 SOUTH PINE ISLAND ROAD			Street A	Street Address (P.O. Box Number is Not Acceptable)					
PLANTATION FL 33324									
- CONTIAN	ION FE 33324						T 75 0 1		
		· 	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.									
ine conganone of registered agent.									
SIGNATURE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00					9. Election Campaign F	financing	\$5.0	0 May Be	
Make Check Payable to Florida Department of State					Trust Fund Contribut	ion.	Added	to Fees	
10.	OFFICERS AND D	U DIRECTORS	11.		ADDITIONS/CHANGES TO OF	FICERS AND [DIRECTORS	S IN 11	
TITLE	PD .	☐ Delete	TITLE		todient & Secretary		☐ Change	Addition	
NAME	CALISE, WILLIAM J JR		NAME	Karen	1 A.Balistreri	5.00			
STREET ADDRESS	777 E. WISCONSIN AVE., STE 140	00	STREET ADDRESS	ן דְיִירִן €	= Wisconsin Avenue	-1-20HE1	1400		
CITY-ST-ZIP	MILWAUKEE WI 53202		CITY-ST-ZIP		Davkel, W1 53202			-	
TITLE NAME	VPAS	☐ Delete	TITLE NAME		stant Secretary		☐ Change	Addition	
STREET ADDRESS	MILLER, JOHN M 777 E. WISCONSIN AVE., STE 140	no	STREET ADDRESS	יחחת א	IW. Ballesteros E.Wisconsin Are.,	Suite 14	100		
CITY-ST-ZIP	MILWAUKEE WI 53202	,	CITY-ST-ZIP		Janker, WI 53202			j	
TITLE	AS	Delete	TITLE				☐ Change	Addition	
NAME	MILLER, JOHN M		NAME						
STREET ADDRESS	777 E. WISCONSIN AVE., STE 129	51	STREET ADDRESS	[
CITY-ST-ZIP .	MILWAUKEE WI 53202		CITY-ST-ZIP	!					
TITLE NAME	AT CTENTED	☐ Delete	TITLE NAME	Į.		į	Change	☐ Addition }	
STREET ADDRESS	ETZEL, STEVEN 777 E. WISCONSIN AVE., STE 140	10	STREET ADDRESS						
CITY-ST-ZIP	MILWAUKEE WI 53202		CITY-ST-ZIP					}	
TITLE	AT SOLOZ	☐ Delete	TITLE				☐ Change	Addition	
NAME	COPPINS, KENT G		NAME			•		_	
STREET ADDRESS	777 E. WISCONSIN AVE., STE 125	51	STREET ADDRESS	J				}	
CITY-ST-ZIP	MILWAUKEE WI 53202		CITY-ST-ZIP	<u> </u>					
TITLE	Τ	☐ Delete	TITLE			[☐ Change	☐ Addition	
NAME CTREET ADDRESS	MALLANY, THOMAS J	no.	NAME CERTIFICATION	1				}	
STREET ADDRESS	777 E. WISCONSIN AVE. STE. 140	JU	STREET ADDRESS	l				ì	

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 application.

CITY-ST-ZIP

SIGNATURE:

MILWAUKEE WI 53202

CITY-ST-ZIP

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR