## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCU 1. Entity Nam HARTMAN			FILED 03 HAR 13 AH 11: 33					
Principal Place of Business HARTMANN DRIVE LEBANON TN 37087		Mailing Address HARTMANN DRIVE LEBANON TN 37087			SECRETARY TALLAHASSE	OF STATE E. FLORIDA	4	
Principal Place of Business     3. Mailing Address								
z. Frincipal F	lace of pusifiess	3. Mailing Address	Mailing Address			•	17	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAK	ING CHANGES	705	
City & State		City & State			4. FEI Number 62- 1686189	<b>⊢</b>	plied For t Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Add Fee Require		
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
C T CORPORATION SYSTEM				Name -				
1200 SOU	Street A	Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324								
			City	-		Zip Code	e	
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								
F After Make Check			Election Campaign Financing     Trust Fund Contribution.		<b>0</b> May Be to Fees			
10.	OFFICERS AND D	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATEUS, LOIS 850 DIXIE HIGHWAY LOUISVILLE KY 40210	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	850	Morreau Dixie Highway sville, KY 40210	☐ Change	Addition	
TITLE	0	□ Delete	TITLE	D	SVITTE, KI 40210	☐ Change	<b>X</b> Addition	
NAME STREET ADDRESS CITY-ST-ZIP	CISZEWSKI, JEROME J 850 DIXIE HIGHWAY LOUISVILLE KY 40210		NAME STREET ADDRESS CITY-ST-ZIP	Kath 100	leen Thie Lenox Drive enceville, NJ 08648			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERMAN, DAVID 850 DIXIE HIGHWAY LOUISVILLE KY 40210	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ken 1	lobal Sales Hinman Hartmann Drive non, TN 37087-0550	☐ Change	<b>X</b> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Steiner, Lisa P 850 dixie Highway Louisville ky 40210	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, 1 Rick 1301	Manufacturing Preston Hartmann Drive non, TN 37087-0550	Change	<b>X</b> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FANTIN, LOUIS 100 LENOX DR LAWRENCEVILLE NJ 08648-2394	☐ Delete	TITLE NAME STREET ADDRESS GITY-ST-ZIP	Cont: Will: 1301	roller iam Boddie Hartmann Drive non, TN 37087-0550	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIFFIN, AUGUSTUS 850 DIXIE HIGHWAY LOUISVILLE KY 40210	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		100014906 03/28/0301042002		☐ Addition	

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

03/17/03

Date

609-844-1333

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Daytime Phone #