Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F97000002393

Corporation Name

Principal Place of Business

ROSEMOUNT AEROSPACE INC.

14300 JUDICIAL RD. BURNSVILLE MN 55306-4898		TAX DEPT 2ND FLOOR RICHFIELD OH 44286 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  05/06/1997	
2. Principal P	2a. Mailing Address	Address		4. FEI Number Applied For		
21		26			41-1729983   Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired 5. Certificate of Status Desired 5. Fee Required	
City & State	е	City & State	City & State		6. Election Campaign Financing \$5.00 May Be	
23		28	28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible	
24	25 29 30		<u> </u>		Personal Property Tax. Yes No	
	9. Name and Address of Cur	rent Registered Agent		,	10. Name and Address of New Registered Agent	
	CORDORATION OVOTERA		81	Name		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			82	Street	t Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324						
			84	City	FL B5 Zip Code	
office or r	paintared agent or both in the St	ate of Florida. Such change was autr ligations of, Section 607.0505, Florida	orized by a Statutes	tne corp i.	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered	<u> </u>		nt signature	e required when reinstating)  DATE  DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
MILE	CD	☐ DELETÉ	1.1 TITLE			
NAME	GRISIK, JOHN J		1.2 NAME			
STREET ADDRESS 250 NO. CLEVELAND-MAS		ILLON RD.		T AODRESS	8	
CITY-ST-ZIP	AKRON OH 44334-0501		1.4 CITY-8	T-ZIP	☐ Change ☐ Addition	
TITLE	DCEO	☐ DELETE	2.1 TITLE		Change D Addition	
NAME	HODGES, RONALD W		2.2 NAME			
STREET ADDRESS				T ADDRESS	S	
CITY-ST-ZIP	The state of the s		2. 4 CITY-	ST-ZIP	☐ Change ☐ Addition	
TITLE	0	☐ DELETE	3.1 TITLE			
NAME	OFFI AND LAND MACOUL ON DD		3.2 NAME			
AMPON OIL 44004 OF OA			T ADDRESS	8		
CITY-ST-ZIP			3.4. CITY- 4.1 TITLE	ST-ZIP	Change Addition	
TITLE	D CEDALD T	C) DECE IS				
NAME			4. 2 NAME	T ADDRESS	s l	
STREET ADDRESS	BURNSVILLE MN 55306-489				×	
CITY-ST-ZIP TITLE	V	DELETE	4.4 City-5	01-LIP	☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS 4020 KINROSS LAKES PKWY.		ſY	5.3 STREET ADDRESS		s	
CITY-ST-ZIP RICHFIELD OH 44286-9368		71.	5.4 CITY-ST-ZIP			
TITLE	111011111111111111111111111111111111111	DELETE	6.1 TITLE		☐ Change ☐ Addition	
			6.2 NAME			
NAME	<u> </u>			T ADDRESS	s	

14. 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 annual report or supplemental anytial 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 12 or Block 13 if changed, or para an attackment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/99

330-659-7643

**FILED** 

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90126 014 \*\*\*150.00

Daytime Phone

R2E034 (11/98)