2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006
Secretary of State

DOCUMENT# F98000002575

Entity Name: HUFCOR DURKEE INC.

Current Principal Place of Business:

12885 44TH ST NORTH
CLEARWATER, FL 33762

New Principal Place of Business:

11527 PYRAMID DRIVE
UNIT 101
ODESSA, FL 33556

Current Mailing Address:

PO BOX 591
JANESVILLE, WI 53547

New Mailing Address:

FEI Number: 59-3506041 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:	DP	( ) Delete
Name:	BORDEN, J. MICHAEL	
Address:	2101 KENNEDY RD.	
City-St-Zip:	JANESVILLE, WI 53547	
Title:	DV	( ) Delete
Name:	MICHALSKI, KENNETH J	
Address:	2101 KENNEDY RD.	
City-St-Zip:	JANESVILLE, WI 53547	
Title:	DST	( ) Delete
Name:	SCOTT, FRANK R	
Address:	2101 KENNEDY RD.	
City-St-Zip:	JANESVILLE, WI 53547	
Title:	DV	( ) Delete
Name:	MOONEY, JOHN B	
Address:	1301 CENTRAL PARK DR	
City-St-Zip:	SANFORD, FL 32771	
Title:	D	(X) Delete
Name:	DURKEE, DAN	
Address:	12885 44TH ST NORTH	
City-St-Zip:	CLEARWATER, FL 33762	

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: FRANK R SCOTT DST 03/21/2006

Electronic Signature of Signing Officer or Director — Date