

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002862

FILED  
Feb 22, 2007  
Secretary of State

Entity Name: AAR MANUFACTURING, INC.

## Current Principal Place of Business:

1100 N. WOOD DALE RD.  
WOOD DALE, IL 60191

## New Principal Place of Business:

## Current Mailing Address:

1100 N. WOOD DALE RD.  
ATTN: HOWARD PULSIFOR  
WOOD DALE, IL 60191

## New Mailing Address:

1100 N. WOOD DALE RD.  
ATTN: HOWARD PULSIFER  
WOOD DALE, IL 60191

FEI Number: 38-2413129

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: PD ( ) Delete  
Name: STORCH, DAVID P  
Address: 1100 N. WOOD DALE RD.  
City-St-Zip: WOOD DALE, IL 60191

Title: VTD ( ) Delete  
Name: ROMENESKO, TIMOTHY J  
Address: 1100 N. WOOD DALE RD.  
City-St-Zip: WOOD DALE, IL 60191

Title: VSD ( ) Delete  
Name: PULSIFER, HOWARD A  
Address: 1100 N. WOOD DALE RD.  
City-St-Zip: WOOD DALE, IL 60191

Title: V ( ) Delete  
Name: MCDONALD, MARK  
Address: 201 HAYNES BLVD  
City-St-Zip: CADILLAC, MI 49601

## 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: V (X) Change ( ) Addition  
Name: MCDONALD, MARK  
Address: 1100 N. WOOD DALE ROAD  
City-St-Zip: WOOD DALE, IL 60191

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: HOWARD A. PULSIFER

VSD

02/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date