

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000003963

1. Entity Name

THE HUDSON-SHARP MACHINE COMPANY

FILED
Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90027 006 ***550.00

Principal Place of Business

975 LOMBARDI AVENUE
 GREEN BAY WI 54307-9038

Mailing Address

975 LOMBARDI AVENUE
 GREEN BAY WI 54307-9038

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2101868

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☒
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME D KOHL, STEWART A
 STREET ADDRESS TERMINAL TOWER, 50 PUBLIC SQ., STE. 4000
 CITY-ST-ZIP CLEVELAND OH 44113

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME D ABLON, BROOKE
 STREET ADDRESS 630 FIFTH AVE., SUITE 1530
 CITY-ST-ZIP NEW YORK NY 10111

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME P HATCHELL, PETER
 STREET ADDRESS 975 LOMBARDI AVENUE
 CITY-ST-ZIP GREEN BAY WI 54307-9038

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME CFO REINERT, GARY P
 STREET ADDRESS 975 LOMBARDI AVENUE
 CITY-ST-ZIP GREEN BAY WI 54307-9038

TITLE ☒ Change ☐ Addition
 NAME Secretary
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME Director
 STREET ADDRESS Don Rushin
 CITY-ST-ZIP 5000 Halifax #107
 Edina, MN 55424

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME Don Levault
 STREET ADDRESS Director
 CITY-ST-ZIP 2609 Youngdale Drive
 Las Vegas NV 89134

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/20/00

Date

920 494-4571

Daytime Phone #

CR2E034 (5/00)