

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004996

FILED
Apr 30, 2004
Secretary of State

Entity Name: AUSTENAL, INC.

Current Principal Place of Business:

570 WEST COLLEGE AVE
C/O TAX DEPARTMENT
YORK, PA 17404

New Principal Place of Business:

Current Mailing Address:

570 WEST COLLEGE AVE
C/O TAX DEPARTMENT
YORK, PA 17404

New Mailing Address:

FEI Number: 36-3826214 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: CEOD () Delete
Name: MILES, JOHN C
Address: 570 W. COLLEGE AVENUE
City-St-Zip: YORK, PA 17404

Title: P () Delete
Name: BERG, GARY
Address: 570 WEST COLLEGE AVE
City-St-Zip: YORK, PA 17404

Title: VP () Delete
Name: JENSON, STEVEN E
Address: 570 WEST COLLEGE AVE
City-St-Zip: YORK, PA 17404

Title: VP () Delete
Name: ROOS, HENRICK J
Address: 570 W. COLLEGE AVENUE
City-St-Zip: YORK, PA 17404

Title: S () Delete
Name: ADDISON, BRIAN M
Address: 570 WEST COLLEGE AVE
City-St-Zip: YORK, PA 17404

Title: T () Delete
Name: REARDON, WILLIAM E
Address: 570 WEST COLLEGE AVE
City-St-Zip: YORK, PA 17404

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:

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 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 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: GARY K KUNKLE

CEOD

04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date

BRET W WISE
570 WEST COLLEGE AVENUE
YORK PA 17404

STEVEN E JENSON
570 WEST COLLEGE AVENUE
YORK PA 17404

GARY K KUNKLE
570 WEST COLLEGE AVENUE
YORK PA 17404