

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000001180

1. Entity Name

CATERPILLAR WORK TOOLS, INC.

Principal Place of Business

600 BALDERSON BLVD.
WAMEGO KS 66547

Mailing Address

600 BALDERSON BLVD.
WAMEGO KS 66547-1836

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

48-0529707

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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
STREET ADDRESS BONATI, RONALD P
CITY-ST-ZIP 100 NE ADAMS ST.
PEORIA IL 61629

TITLE ☒ Delete
NAME DP
STREET ADDRESS DELPH, CHARLES M
CITY-ST-ZIP 6 CORPORATE WOODS, 8900 INDIAN CREEK PKWY.
OVERLAND PARK KS 66210

TITLE ☐ Delete
NAME D
STREET ADDRESS MCKIE, DAVID A
CITY-ST-ZIP 100 NE ADAMS ST.
PEORIA IL 61629

TITLE ☐ Delete
NAME D
STREET ADDRESS PALMER, GERALD
CITY-ST-ZIP 100 NE ADAMS ST.
PEORIA IL 61629

TITLE ☐ Delete
NAME V
STREET ADDRESS JOHNSON, GLEN J
CITY-ST-ZIP 600 BALDERSON BLVD.
WAMEGO KS 66547

TITLE ☐ Delete
NAME V
STREET ADDRESS LANGVARDT, CHRIS C
CITY-ST-ZIP 600 BALDERSON BLVD.
WAMEGO KS 66547

TITLE ☐ Change ☒ Addition
NAME T
STREET ADDRESS GUYER, MIKE D.
CITY-ST-ZIP 6 CORPORATE WOODS, 8900 INDIAN CREEK PKWY.
OVERLAND PARK, KS 66210

TITLE ☒ Change ☐ Addition
NAME D/P
STREET ADDRESS FELLIN, PAOLO
CITY-ST-ZIP 6 CORPORATE WOODS, 8900 INDIAN CREEK PKWY.
OVERLAND PARK, KS 66210

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS PFEFFER, JOHN E.
CITY-ST-ZIP 100 NE ADAMS ST.
PEORIA, IL 61629

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

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

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

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: Chris Langvardt Chris Langvardt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00

Date

785-456-6391

Daytime Phone #

CR2E034 (9/99)



DO NOT WRITE IN THIS SPACE