## FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 15, 2001 8:00 am Secretary of State DOCUMENT # F99000002770 1. Entity Name 05-15-2001 90001 001 \*\*\*150 00 PFLEIDERER LEASING USA, INC. Mailing Address Principal Place of Business TWO PERIMETER PARK SOUTH TWO PERIMETER PARK SOUTH SUITE 475 WEST SUITE 475 WEST BIRMINGHAM AL 32543 BIRMINGHAM AL 32543 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-2460360 Not Applicable \$8.75 Additional П 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent **BROWN, JENNY** Street Address (P.O. Box Number is Not Acceptable) 4131 HIGHWAY 17 SOUTH BARTOW FL 33830 Zip Code City 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (10/00) Change TITLE TITLE NAME RAUSCHER, HELMUT NAME STREET ADDRESS INGOLSTADTER STRABE 51 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP D-92318 NEUMARKT GERMANY TITLE Delete TITLE DVP NAME FLEISCHER, MANFRED NAME STREET ADDRESS STREET ADDRESS INGOLSTADTER STRABE 51 CITY-ST-7IP **D-92318 NEUMARKT GERMANY** CITY-ST-ZIP TITLE - - 🖃 Delete TITLE SD NAME NAME HENLEIN, CARL A STREET ADDRESS TWO PERIMETER PARK SOUTH, SUITE 475 WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BIRMINGHAM AL 35243 Addition TITLE ☐ Delete TITLE PD NAME FOUST, EARL R NAME TWO PERIMETER PARK SOUTH, SUITE 475 WEST STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP <u>BIRMINGHAM AL 35243</u> ☐ Change ☐ Addition ☐ Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete

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.

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICE OF DIRECTOR

NAME

STREET ADDRESS

CITY-ST-ZIP

2 of .968 · 7290