FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 14 PM 3:34

DOCUMENT # P05000 (5)

1. Corporation Name
ALLSTEEL, INC.

Principal Place of Business	Mailing Address
ALLSTEEL DRIVE AURORA IL 60507-0871 US	ALLSTEEL DRIVE AURORA IL 60507-7671

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
02/12/1985	05/27/1994

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	
21	26	36-0717079	Applied For / Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	President, Chairman	☒ Change ☐ Addition
NAME	JESKA, P.K.	1.2 NAME	Sharp, Edgar E.	
STREET ADDRESS	P.O. BOX 365 N/A	1.3 STREET ADDRESS	P.O. Box 8338, 2110 Harbourside Drive #514	
CITY-ST-ZIP	PROSPECT HEIGHTS IL	1.4 CITY-ST-ZIP	Longboat Key, FL 34228	
TITLE	VP	2.1 TITLE		☐ Change ☐ Addition
NAME	HERIFORD, RE	2.2 NAME		
STREET ADDRESS	TWO OAKBROOK CLUB DR. #310 B	2.3 STREET ADDRESS		
CITY-ST-ZIP	OAK BROOK IL 60521	2.4 CITY-ST-ZIP		
TITLE	C	3.1 TITLE	Director	☒ Change ☐ Addition
NAME	DAVIES, H G	3.2 NAME	Walters, Harold E.	
STREET ADDRESS	P O BOX 68	3.3 STREET ADDRESS	390 St. Kilda Rd	
CITY-ST-ZIP	MENTONE, VIC, AUST.	3.4 CITY-ST-ZIP	Melbourne, Victoria, Australia 3004	
TITLE	VP	4.1 TITLE		☐ Change ☐ Addition
NAME	COSGROVE, D.T.	4.2 NAME		
STREET ADDRESS	557 SEVILLE AVE.	4.3 STREET ADDRESS		
CITY-ST-ZIP	NAPERVILLE IL	4.4 CITY-ST-ZIP		
TITLE	VP	5.1 TITLE	Secretary	☒ Change ☐ Addition
NAME	FISHEL, D.D.	5.2 NAME	Robertson, Gayle L.	
STREET ADDRESS	419 POTTOWATAMIE CT.	5.3 STREET ADDRESS	2539 Bedford St. # 34-D	
CITY-ST-ZIP	OSWEGO IL	5.4 CITY-ST-ZIP	Stamford, CT 06905	
TITLE	PV	6.1 TITLE	V.P.	☒ Change ☐ Addition
NAME	SAMEK, P.C.	6.2 NAME		
STREET ADDRESS	818 BAL MORAL CIR.	6.3 STREET ADDRESS		
CITY-ST-ZIP	NAPERVILLE IL 60540	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 4/3/95 (706) 859-2600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000083 FN