

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 24, 2002 8:00 am**  
**Secretary of State**

04-24-2002 90399 043 \*\*\*150.00

**DOCUMENT # P11690**

1. Entity Name  
**NEW HOLLAND NORTH AMERICA, INC.**

Principal Place of Business

**500 DILLER AVE  
TAX DEPT  
RACINE WI 53404**

Mailing Address

**700 STATE ST  
TAX DEPT  
RACINE WI 53404**

2. Principal Place of Business

**500 DILLER AVE**

Suite, Apt. #, etc.

**TAX DEPT**

City & State

**NEW HOLLAND PA**

Zip

**17557**

Country

**USA**

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

**38-2688619**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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, 2002 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

TITLE	<b>S</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>SERINE, CELIA D</b>	
STREET ADDRESS	<b>500 DILLER AVE.</b>	
CITY-ST-ZIP	<b>NW HOLLAND PA 15775</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>RIDER, AR</b>	
STREET ADDRESS	<b>500 DILLER AVE</b>	
CITY-ST-ZIP	<b>NEW HOLLAND PA</b>	
TITLE	<b>AS</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>MITCHELL, J. B.</b>	
STREET ADDRESS	<b>500 DILLER AVE</b>	
CITY-ST-ZIP	<b>NEW HOLLAND PA</b>	
TITLE	<b>CFO</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>SHAUB, HARRY J.</b>	
STREET ADDRESS	<b>500 DILLER AVE</b>	
CITY-ST-ZIP	<b>NEW HOLLAND PA</b>	
TITLE	<b>VPD</b>	<input type="checkbox"/> Delete
NAME	<b>MELANI, AGOSTINO</b>	
STREET ADDRESS	<b>245 E NORTH AVE</b>	
CITY-ST-ZIP	<b>CAROL STREAM IL 60188</b>	
TITLE	<b>AT</b>	<input type="checkbox"/> Delete
NAME	<b>ZECCHINI, ENRICO</b>	
STREET ADDRESS	<b>375 PARK AVE SUITE 2703</b>	
CITY-ST-ZIP	<b>NEW YORK NY 10152</b>	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>SECRETARY (S)</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>KUPER, DEBRA E</b>	
STREET ADDRESS	<b>700 STATE STREET</b>	
CITY-ST-ZIP	<b>RACINE, WI 53404</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>ASST. SECRETARY (AS)</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>FELTHAM, DUDLEY</b>	
STREET ADDRESS	<b>500 DILLER AVE</b>	
CITY-ST-ZIP	<b>NEW HOLLAND, PA 17557</b>	
TITLE	<b>VICE PRESIDENT AND TREASURER (VT)</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>FORNARO, ALBERTO</b>	
STREET ADDRESS	<b>700 STATE STREET</b>	
CITY-ST-ZIP	<b>RACINE, WI 53404</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

**SIGNATURE REQUIRED TAX OFFICER**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/24/02 362-636-6862**  
Date Daytime Phone #

CR2E034 (9/01)

Attachment  
DOC# P11690  
775459

## Directors, Officers Report

New Holland North America, Inc.

Monday, January 28, 2002

### DIRECTORS

**Bruno Doria** Director  
Primary Address: 950 Great West Road  
Brentford, Middlesex TW8 9ES

**Agostino Melani** Director  
Primary Address: 245 East North Avenue  
Carol Stream, IL 60188

**Allen R. Rider** Director  
Primary Address: 500 Diller Ave.  
New Holland, PA 17557

**Daniele G. Rulli** Director  
Primary Address: CNH Global N.V.  
Global Management Offices  
100 South Saunders Road  
Lake Forest, IL 60045

### OFFICERS

**Allen R. Rider** President and Chief Executive Officer  
Primary Address: 500 Diller Ave.  
New Holland, PA 17557

**Robert A. Bernardi** Vice President Global Product Lines Hay Tools and Skid-Steer Loaders  
Primary Address: 500 Diller Avenue  
New Holland, PA 17557

**Michael D. Jack** Vice President Human Resources  
Primary Address: 500 Diller Avenue  
New Holland, PA 17557

**Agostino Melani** Vice President New Holland Construction Equipment Division  
Primary Address: 245 East North Avenue  
Carol Stream, IL 60188

**John Trueman** Vice President Construction Equipment Division, North American Sales and  
Marketing  
Primary Address: 245 E. North Avenue  
Carol Stream, IL 60188

**Alberto Fornaro** Vice President and Treasurer  
Primary Address: None given

**Debra E Kuper** Secretary  
Primary Address: Opus Landmark Building  
100 South Saunders Road  
Lake Forest, IL 60045

Attachment  
DOC# P111690  
775459

New Holland North America, Inc.

**Joseph A. Rossi**

**Controller**

Primary Address:

Opus Landmark Building  
100 South Saunders Road  
Lake Forest, IL 60045

**Dudley H. Feltham**

**Assistant Secretary**

Primary Address:

500 Diller Ave.  
New Holland, PA 17557

**Larry W. Miller**

**Assistant Secretary**

Primary Address:

500 Diller Avenue  
New Holland, PA 17557

**Enrico Zecchini**

**Assistant Treasurer**

Primary Address:

375 Park Avenue  
Suite 2703  
New York, NY 10152

**Donald R. Costa**

**Tax Officer**

Primary Address:

Case Corporation  
700 State Street  
Racine, WI 53404

**Joanne K. Leskiewicz**

**Tax Officer**

Primary Address:

Case Corporation  
700 State Street  
Racine, WI 53404

**Paolo Castagna**

**Assistant Treasurer**

Primary Address:

Opus Landmark Building  
100 South Saunders Road  
Lake Forest, IL 60045