FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P30617** **(5)**

1. Corporation Name

DRAW-TITE, INC.

Principal Place of Business

40500 VAN BORN ROAD
1209 ORANGE STREET
CANTON MI 48188
US

Mailing Address

C/O TAX DEPT
21001 VAN BORN ROAD
TAYLOR MI 48180
US

3. Date Incorporated or Qualified: **07/17/1990**

3a. Date of Last Report: **04/10/1995**

4. FEI Number: **38-2935446** [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. [X] Yes [ ] No

2. Principal Place of Business
21 Street, Apt. #, etc.
22 City & State
23 Zip 24 County 25

2a. Mailing Address
26 Street, Apt. #, etc.
27 City & State
28 Zip 29 Country 30

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 607.1502, 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

12. OFFICERS AND DIRECTORS

TITLE	CSD	[ ] DELETE
NAME	CAMPBELL, BRIAN P.	
STREET ADDRESS	315 E. EISENHOWER PKWY	
CITY-ST-ZIP	ANN ARBOR MI	
TITLE	VSD	[ ] DELETE
NAME	MEYERS, WILLIAM E.	
STREET ADDRESS	315 E. EISENHOWER PKWY	
CITY-ST-ZIP	ANN ARBOR MI	
TITLE	P	[X] DELETE
NAME	MEYERS, WILLIAM E.	
STREET ADDRESS	40500 VAN BORN ROAD	
CITY-ST-ZIP	TAYLOR MI	
TITLE	VT	[ ] DELETE
NAME	DECHANTS, PETER C.	
STREET ADDRESS	315 E. EISENHOWER PKWY	
CITY-ST-ZIP	ANN ARBOR MI	
TITLE	AS	[ ] DELETE
NAME	SILVERMAN, BARRY J	
STREET ADDRESS	21001 VAN BORN RD	
CITY-ST-ZIP	TAYLOR MI	
TITLE	D	[ ] DELETE
NAME	EUGENE A GARGARO, JR.	
STREET ADDRESS	21001 VAN BORN RD	
CITY-ST-ZIP	TAYLOR MI	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		[ ] Change [ ] Addition
1 NAME		
1 STREET ADDRESS		
1 CITY-ST-ZIP		
2 TITLE	VASD	[X] Change [ ] Addition
2 NAME		
2 STREET ADDRESS		
2 CITY-ST-ZIP		
3 TITLE	PRESIDENT	[ ] Change [X] Addition
3 NAME	MELLOW, JAMES L.	
3 STREET ADDRESS	40500 VAN BORN ROAD	
3 CITY-ST-ZIP	CANTON, MI 48188	
4 TITLE		[ ] Change [ ] Addition
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		[ ] Change [ ] Addition
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE		[ ] Change [ ] Addition
6 NAME		
6 STREET ADDRESS		
6 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is true and accurate, 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 with an "X" in the adjacent box, or on an attached sheet with an explanation.

SIGNATURE: W. E. Meyers William E. Meyers 4/12/96 (313) 274-7400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
VP/Director/Asst. Secty.

CR2E034 (12/95)

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