

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995

FLORIDA DEPARTMENT OF STATE  
Sandra D. Matheson  
Secretary of State  
Office of the Secretary of State



APPROVED  
AND  
FILED

95 MAY -1 AM 1:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P34386** (3)

1. CORPORATION NAME  
**YUASA-EXIDE, INC.**

Principal Office Address: **645 PENN ST. READING PA 19601**  
Mailing Address: **645 PENN ST. READING PA 19601**

DO NOT WRITE IN THIS SPACE

2. Principal State of Incorporation <b>21 PA</b>		2b. Mailing Address State <b>26 PA</b>		3. Date Inc. (FD-100) filed for (2000) <b>06/19/1991</b>	3a. Date of Last Report <b>08/10/1994</b>
22. State, Apt. # etc. <b>PA</b>		27. State, Apt. # etc. <b>PA</b>		4. FID Number <b>95-2388156</b>	Applied For <input type="checkbox"/> Not Applicable
23. City & State <b>PA</b>		28. City & State <b>PA</b>		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
24. Type of Corporation <b>25</b>		29. Filing Date <b>30</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24. Yes		29. No		7. Has corporation been subject to an administrative order under 519.002(2)(b) Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301</b>				10. Name and Address of New Registered Agent	
				B1	Name
				B2	Street Address (P.O. Box Number is Not Acceptable)
				B3	
				B4	City
				FL	B5 Zip Code

11. Pursuant to the provisions of Sections 607.0002 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: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD YUASA, TERUHISA 9728 ALBURTIS AVE. SANTA FE SPRINGS CA	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PD EHLERMAN, P. MICHAEL 645 PENN ST. READING PA	2. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	V TSUJI, SABURO 9728 ALBURTIS AVE. SANTA FE SPRINGS CA	3. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY, ST., ZIP	V BIGGINS, LESLIE H. 9728 ALBURTIS AVE. SANTA FE SPRINGS CA	4. CITY, ST., ZIP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY, ST., ZIP	T SMITH, BRUCE 645 PENN ST. READING PA	5. CITY, ST., ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
CITY, ST., ZIP	SV NAGATA, HISAYOSHI 645 PENN ST. READING PA	6. CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**TV  
PHILSON, MICHAEL  
645 PENN ST  
READING PA**

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.002(5)(b), Florida Statutes. I further certify that the information included 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. This filing is effective as to the corporation or the registered financial institution named to receive this report as required by Chapter 607, Florida Statutes, and that my terms of appointment, if applicable, are as stated on an attachment with an address.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95