

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90006 042 ***150.00

A0020809



DO NOT WRITE IN THIS SPACE

DOCUMENT # P38423

1. Entity Name
AAF-MCQUAY INC.

Principal Place of Business

Mailing Address

S CALVERT ST
 TIMORE MD 21202

13600 INDUSTRIAL PARK BLVD.
 PLYMOUTH MN 55441-3743
 US

2. Principal Place of Business
 215 Central Avenue
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Louisville, KY ~~XXXX~~
 Zip
 40208
 Country
 U.S.A.

City & State

4. FEI Number **41-0404230**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH 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, 2000 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	PCEO	<input checked="" type="checkbox"/> Delete
NAME	HUNTER, JOSEPH B.	
STREET ADDRESS	111 S. CALVERT ST STE 2800	
CITY-ST-ZIP	BALTIMORE MD 21202	
TITLE	EV	<input type="checkbox"/> Delete
NAME	BOEHRS, GERALD L.	
STREET ADDRESS	215 CENTRAL AVE	
CITY-ST-ZIP	LOUISVILLE KY 40208	
TITLE	EV	<input type="checkbox"/> Delete
NAME	CHRISTOPHER, MICHAEL J	
STREET ADDRESS	111 S. CALVERT ST., STE #2800	
CITY-ST-ZIP	BALTIMORE MD 21202	
TITLE	GCAS	<input type="checkbox"/> Delete
NAME	RANDLE, DIXIE L	
STREET ADDRESS	13600 INDUSTRIAL PARK BLVD.	
CITY-ST-ZIP	PLYMOUTH MN 55441	
TITLE	SCFO	<input checked="" type="checkbox"/> Delete
NAME	MORRISON, ANDREW R	
STREET ADDRESS	111 S CALVERT ST., STE 2800	
CITY-ST-ZIP	BALTIMORE MD 21202	
TITLE	T	<input type="checkbox"/> Delete
NAME	PEDESON, RONALD J	
STREET ADDRESS	111 S. CALVERT ST., STE 2800	
CITY-ST-ZIP	BALTIMORE MD 21202	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President and CEO	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ho Nyuk Choy	
STREET ADDRESS	215 Central Avenue	
CITY-ST-ZIP	Louisville, KY 40208	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Executive Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Michael J. Christopher	
STREET ADDRESS	1730 Crows Next Lane	
CITY-ST-ZIP	York, PA 17403	
TITLE	General Counsel & Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dixie L. Randle	
STREET ADDRESS	215 Central Avenue	
CITY-ST-ZIP	Louisville, KY 40208	
TITLE	Vice President-Finance	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bruce D. Krueger	
STREET ADDRESS	215 Central Avenue	
CITY-ST-ZIP	Louisville, KY 40208	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ronald J. Pederson	
STREET ADDRESS	215 Central Avenue	
CITY-ST-ZIP	Louisville, KY 40208	

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: Dixie L. Randle
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Dixie L. Randle, General Counsel and Secretary

2/01/00

Date

612/553-5179

Daytime Phone #

CR2E034 (9/99)