

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2000 8:00 am**  
**Secretary of State**

05-02-2000 90109 019 \*\*\*150.00

**DOCUMENT # F98000007036**

1. Entity Name

**CATERPILLAR POWER SYSTEMS INC.**

Principal Place of Business

Mailing Address

**100 NORTHEAST ADAMS STREET  
 PEORIA IL 61629**

**100 NORTHEAST ADAMS STREET  
 PEORIA IL 61629-0001**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**37-1349189**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>COBD</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>SHAHEEN, GERALD L</b>	
STREET ADDRESS	<b>100 NORTHEAST ADAMS STREET</b>	
CITY-ST-ZIP	<b>PEORIA IL 61629</b>	
TITLE	<b>PD</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>PFEFFER, JOHN E</b>	
STREET ADDRESS	<b>4-10-1, YOGA, SETAGAYA-KU, TOKYO 158</b>	
CITY-ST-ZIP	<b>JAPAN</b>	
TITLE	<b>VD</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>MURRAY, H. K</b>	
STREET ADDRESS	<b>100 NORTHEAST ADAMS STREET</b>	
CITY-ST-ZIP	<b>PEORIA IL 61629</b>	
TITLE	<b>V</b>	<input type="checkbox"/> Delete
NAME	<b>THOMAS, DAVID B</b>	
STREET ADDRESS	<b>100 NORTHEAST ADAMS STREET</b>	
CITY-ST-ZIP	<b>PEORIA IL 61629</b>	
TITLE	<b>S</b>	<input type="checkbox"/> Delete
NAME	<b>ZUNDEL, JURG O</b>	
STREET ADDRESS	<b>100 NORTHEAST ADAMS STREET</b>	
CITY-ST-ZIP	<b>PEORIA IL 61629</b>	
TITLE	<b>T</b>	<input type="checkbox"/> Delete
NAME	<b>GLEICH, JAMES L</b>	
STREET ADDRESS	<b>100 NORTHEAST ADAMS STREET</b>	
CITY-ST-ZIP	<b>PEORIA IL 61629</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	
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	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

*For Additions/Changes  
 Please see Attached Sheet*

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:** *Florida S. Smith*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 27, 2000

Date

309/675-5587

Daytime Phone #

CR2E034 1/9/99

**CATERPILLAR POWER SYSTEMS INC.**

**Federal Employer Identification No. 37-1349189  
Foreign Corporation Annual Report**

Attachment  
C0079459  
#  
F98000007036

12. Additions/Changes to Officers and Directors in 11:

**Officers**

Chairman of the Board (COBD)	Douglas R. Oberhelman 100 N. E. Adams Peoria, IL 61629	Change
President (PD)	Mark C. Schoeneman Old Galena Road, Bldg. H Mossville, IL 61552	Change
Vice President and Managing Director (VM/D)	Terry A. Goff 4-10-1, Yoga, Setagaya-Ku Tokyo 158 JAPAN	Change
Vice President (V)	David B. Thomas Old Galena Road, Bldg. H Mossville, IL 61552	
Secretary (S)	Jurg O. Zundel, Esq. Old Galena Road, Bldg. H Mossville, IL 61552	
Treasurer (T)	James L. Gleich Old Galena Road, Bldg. H Mossville, IL 61552	
Assistant Secretary (AS)	Rhonda S. Smith 100 N. E. Adams Peoria, IL 61629	Addition
Assistant Treasurer (AT)	Robin D. Beran 100 N. E. Adams Peoria, IL 61629	Addition
Director (D)	Stuart L. Levenick 4-10-1, Yoga, Setagaya-Ku Tokyo 158 JAPAN	Addition