

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 # 843777 (4)
1. Corporation Name:

Ahlstrom Machinery Inc

000001841780
-05/23/96--01017--002
***225.00

Principal Place of Business: Ridge Center, Glens Falls, NY 12801
Mailing Address: c/o Legal Dept, Ridge Center, 101 Ridge Street, Glens Falls, NY 12801 USA

3. Date Incorporated or Qualified: 07/11/1979
3a. Date of Last Report: 04/25/95

2. Principal Place of Business: 21 Suite, Apt. #, etc; 22 City & State; 23 Zip; 24 Country
2a. Mailing Address: 26 Suite, Apt. #, etc; 27 City & State; 28 Zip; 29 Country; 30

4. FEI Number: 14-1438713
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: Yes No

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
85 Zip Code: FL

11. Pursuant to the provisions of Sections 607.0502 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	C/D	<input type="checkbox"/> DELETE
NAME	Ronkko, Tuomo	
STREET ADDRESS	Sentnerikuja 2	
CITY-ST-ZIP	SF-00441 Helsinki, Finland	
TITLE	P/D	<input type="checkbox"/> DELETE
NAME	Bilodeau, Victor L.	
STREET ADDRESS	16 Cobblestone Drive	
CITY-ST-ZIP	Queensbury, NY 12804	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Greenwood, Brian	
STREET ADDRESS	11 Woodcrest Drive	
CITY-ST-ZIP	Queensbury, NY 12804	
TITLE	V/S	<input type="checkbox"/> DELETE
NAME	Kelly, Morgan	
STREET ADDRESS	19 Honey Hollow Rd.	
CITY-ST-ZIP	Queensbury, NY 12804	
TITLE	T	<input type="checkbox"/> DELETE
NAME	Pawlick, David	
STREET ADDRESS	5 Keystone Commons	
CITY-ST-ZIP	Ballston Lake, NY 12019	
TITLE	Ct	<input type="checkbox"/> DELETE
NAME	Morphis, John E.	
STREET ADDRESS	156 E. Sanford St.	
CITY-ST-ZIP	Glens Falls, NY 12801	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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, 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 if I have signed, or on an attachment with an address

SIGNATURE: *John E. Morphis*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/96
518-745-2778
OS 5/18/96

CR2E034 (12/95)