## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F95000004667

Entity Name: BWD AUTOMOTIVE CORPORATION

Apr 16, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 11045 GAGE AVE. FRANKLIN PARK, IL 60131 **Current Mailing Address: New Mailing Address:** C/O 4500 DORR. STREET P.O. BOX 1000 TOLEDO, OH 43697 FEI Number: 06-1043482 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition WHITED, HARRY DALEY, ROBERT Name: Name: 175 N. BRANFORD ROAD 741 BOSTON POST ROAD, SUITE 100 Address: Address: City-St-Zip: BRANFORD, CT 06405 City-St-Zip: GUILFORD, CT 06437 27 **VPS** Title: Title: () Delete () Change () Addition Name: KELLER, STEVEN E Name: 4500 DORR. STREET/P.O. BOX 1000 Address: Address: TOLEDO, OH 43697 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition PATON, A. GLENN Name: Name: 4500 DORR ST/ P.O. BOX 1000 Address: Address: City-St-Zip: TOLEDO, OH 43697 City-St-Zip: Title: VPD () Delete Title: VPD (X) Change ( ) Addition MADDEN, THOMAS MADDEN, THOMAS Name: Name: Address: 100 DOUBLE BEACH RD Address: 4500 DORR ST/P.O. BOX 1000 City-St-Zip: City-St-Zip: BRANFORD, CT 06405 TOLEDO, OH 43697 Title: Title: () Delete () Change () Addition CZARKA, CHRISTOPHER J Name: Name: 4500 DORR ST./P.O. BOX 1000 Address: Address: City-St-Zip: TOLEDO, OH 43697 City-St-Zip: Title: () Delete Title: () Change () Addition HINDE, CHARLES W Name: Name: 4500 DORR ST. / P.O. BOX 1000 Address: Address: City-St-Zip: City-St-Zip: TOLEDO, OH 43697

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER J. CZARKA AT 04/16/2002