

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 OCT 26 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96000002311

1. Corporation Name
NACCO MATERIALS HANDLING GROUP, INC.

1098-24213

Principal Place of Business
P.O. BOX-2902
PORTLAND OR 97208

Mailing Address
P.O. BOX-2902
PORTLAND OR 97208



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 650 NE Holladay St. Suite, Apt. #, etc. 1600 City & State Portland, OR Zip 97232 Country USA		3. New Mailing Office Address, If Applicable 650 NE Holladay St. Suite, Apt. #, etc. 1600 City & State Portland, OR Zip 97232 Country USA		4. Date Incorporated or Qualified To Do Business in Florida 05/08/1996	
				5. FEI Number 90-0160700 Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status					

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	EKLUND, REGINALD R	2701-NW VAUGHN ST 650 NE Holladay St., #1600	PORTLAND OR 97232
V	HUI, JULIE C	2701-NW VAUGHN ST 650 NE Holladay St., #1600	PORTLAND OR 97232
S	LEWIS, GEOFFREY D	2701-NW VAUGHN ST 650 NE Holladay St., #1600	PORTLAND OR 97232
T	MATTERN, JEFFREY C	2701-NW VAUGHN ST 650 NE Holladay St., #1600	PORTLAND OR 97232
V=	BAUNSGARD, GLEN P Stephen M. Malm	4015 E VOORHEES STREET 650 NE Holladay St., #1600	DANVILLE IL Portland, OR 97232
V	BROGAN, MICHAEL	VIA EMILIA EST 1439	MODENA ITALY

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

REINSTATEMENT

Name
Street Address (Post Office Box Numbers Not Acceptable)
Suite, Apt. #, Etc.
City
State
Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. \$900.00 ***300.00

Signature of Registered Agent
Karen E. Wehner, REGISTERED AGENT MUST SIGN Asst. V.P.

Date December 21, 1998

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for information on Intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 10/7/98

Daytime Phone # 503-721-6061

CR2E040 (8/97)