

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32328

FILED  
Jan 30, 2008  
Secretary of State

Entity Name: HULCO SALES CORP.

**Current Principal Place of Business:**

101 N. 9TH ST  
TERRE HAUTE, IN 47807 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 150  
TERRE HAUTE IN  
TERRE HAUTE, IN 47808 US

**New Mailing Address:**

FEI Number: 35-1812152      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: GEORGE, MARI H.,  
Address: 101 N. 9TH STREET  
City-St-Zip: TERRE HAUTE, IN

Title: PD ( ) Delete  
Name: GEORGE, ANTON H.,  
Address: 101 N 9TH STREET  
City-St-Zip: TERRE HAUTE, IN

Title: STD ( ) Delete  
Name: BELSKUS, JEFFREY G.,  
Address: 101 N. 9TH STREET  
City-St-Zip: TERRE HAUTE, IN

Title: VP ( ) Delete  
Name: MORRIS, GARY  
Address: 101 N 9TH STREET  
City-St-Zip: TERRE HAUTE, IN 478080150

Title: AST ( ) Delete  
Name: FORSYTHE, LINDA  
Address: 101 N 9TH STREET  
City-St-Zip: TERRE HAUTE, IN 478080150

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LINDA FORSYTHE

AST

01/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date