

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90054 049 ***150.00

DOCUMENT # P32328

1. Entity Name

HULCO SALES CORP.

Principal Place of Business

Mailing Address

101 N. 9TH ST
 TERRE HAUTE IN 47807
 US

P.O. BOX 150
 TERRE HAUTE IN
 TERRE HAUTE IN 47808-0150
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

35-1812152

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
 1200 S. 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	PD	<input checked="" type="checkbox"/> Delete
NAME	HIPPLEHEUSER, ROBERT L.	
STREET ADDRESS	101 N. 9TH STREET	
CITY-ST-ZIP	TERRE HAUTE IN	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GEORGE, MARI H.	
STREET ADDRESS	101 N. 9TH STREET	
CITY-ST-ZIP	TERRE HAUTE IN	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GEORGE, ANTON H.	
STREET ADDRESS	101 N. 9TH STREET	
CITY-ST-ZIP	TERRE HAUTE IN	
TITLE	STD	<input type="checkbox"/> Delete
NAME	BELSKUS, JEFFREY G.	
STREET ADDRESS	101 N. 9TH STREET	
CITY-ST-ZIP	TERRE HAUTE IN	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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	President & Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	George, Anton H	
STREET ADDRESS	101 N. 9th St.	
CITY-ST-ZIP	Terre Haute, IN	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice Pres.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Morris, Gary	
STREET ADDRESS	101 N. 9th St.	
CITY-ST-ZIP	Terre Haute, IN 47808-0150	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Asst. Secretary & Treas	
STREET ADDRESS	Forsythe, Linda	
CITY-ST-ZIP	101 N. 9th St. Terre Haute, IN 47808-0150	

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: *Linda Forsythe*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Linda Forsythe**

4/25/00

Date

(812) 232-9446

Daytime Phone #

CR2F034 (9/99)