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09-21-1999

09-15-1999



Docket No.:

6512-3424

Tab SI U.S. Patent & TMOfr/TM Mail Rcpt Dt. #40

To the honorable Commissioner of Patents

101149017

attached original documents or copy thereof.

1. Name of conveying party(ies):

Lamson Corporation
1633 Broadway
New York, NY 10019

MRD
9-15-99

- Individual(s)
- General Partnership
- Corporation-State New York Corporation
- Other
- Association
- Limited Partnership

Additional names(s) of conveying party(ies) attached? Yes No

2. Name and address of receiving party(ies):

Name: Lamson Corporation

Internal Address: 1800 Gardner Expressway

Street Address:

City: Quincy State: IL ZIP: 62301

- Individual(s) citizenship
- Association
- General Partnership
- Limited Partnership
- Corporation-State Delaware
- Other

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No

(Designations must be a separate document from Assignment)

Additional name(s) & address(es) attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other Change of Address
- Merger
- Change of Name

Execution Date: September 2, 1998

4. Application number(s) or registration numbers(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

1,822,417 1,792,478
1,622,080
1,786,482

Additional numbers attached? Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: James B. Conte

Internal Address: Lee, Mann, Smith et al

209 S. LaSalle St.

Chicago, IL 60604

Street Address:

City: State: ZIP:

6. Total number of applications and registrations involved: 4

7. Total fee (37 CFR 3.41): \$ 160.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

12-0913

09/20/1999 NTHA11 00000288 1822417

DO NOT USE THIS SPACE

01 FC:481 40.00 OP
02 FC:482 75.00 OP

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

JAMES B. CONTE

Name of Person Signing

James Conte

Signature

9/15/99

Date

Total number of pages including cover sheet, attachments, and document: 3

Refund Ref: 09/20/1999 NTHA11 00000288

CHECK Refund Total: \$45.00

Biennial Statement

Section 408 of the Business Corporation Law requires corporations to update and provide current information to the Department of State every two years. Please sign and return this statement with the required fee.

652922

LAMSON CORPORATION
PO BOX 4857
SYRACUSE NY 13221-4857

For: LAMSON CORPORATION

Please see reverse side for instructions for completing this form.

NYS DEPARTMENT OF STATE - DIVISION OF CORPORATIONS

Biennial Statement, Part A

CORPORATION NAME

LAMSON CORPORATION

652922	FILING PERIOD 09/1998	FEE \$9.00
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<input type="checkbox"/>	The corporation is a corporation engaged in the production of crops, livestock, and livestock products on land used in agricultural production (Agriculture and Markets Law Section 301). It is not required to report.		
NAME AND BUSINESS ADDRESS OF THE CHAIRMAN OF THE BOARD OF DIRECTORS	NAME		
	ADDRESS		
	CITY	STATE	ZIP + 4
ADDRESS OF THE PRINCIPAL EXECUTIVE OFFICE	NAME LAMSON CORPORATION		
	ADDRESS 1800 GARDNER EXPRESSWAY		
	CITY QUINCY	STATE IL	ZIP + 4 62301
SERVICE OF PROCESS ADDRESS	NAME LAMSON CORPORATION		
	ADDRESS 1633 BROADWAY		
	CITY NEW YORK	STATE NY	ZIP + 4 10019

NYS DEPARTMENT OF STATE - DIVISION OF CORPORATIONS

Biennial Statement, Part B

CORPORATION NAME

LAMSON CORPORATION

- (1) **NAME AND BUSINESS ADDRESS OF THE CHAIRMAN OF THE BOARD OF DIRECTORS**
PHILLIP R ROTH
%GARDNER DENVER MACHINERY INC
1800 GARDNER EXPRESSWAY
QUINCY IL 62301
- (2) **ADDRESS OF THE PRINCIPAL EXECUTIVE OFFICE**
LAMSON CORPORATION
1 LAMSON STREET
SYRACUSE NY 13206
- (3) **SERVICE OF PROCESS ADDRESS**
LAMSON CORPORATION
PO BOX 4857
SYRACUSE NY 13221-4857

652922	FILING PERIOD 09/1998	FEE \$9.00
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PLEASE SEE TO CHANGES TO THE INFORMATION REPORTED IN PART B. PLEASE CHECK THE BOX TO NOT COMPLETE PART A.

Sign and complete Part C on reverse side. Include payment of \$9.00 payable to the Dept. of State.

If you have questions or require assistance completing this form you may call (518) 473-2492 or write to the NYS Department of State, Division of Corporations, Albany, NY 12231-0002. Please type or print clearly using black ink.

Only complete the section(s) of Part A that change information as printed in Part B. If no changes, leave Part A blank, and check the box which appears in Part B.

- A(1) Corporations engaged in the production of crops, livestock and livestock products on land used in agricultural production need not complete the form or pay the required fee. If the corporation qualifies for the exemption, check the box, sign the form at the bottom and return to the Department of State.
- A(2) Chairman of the Board of Directors means the individual who is head of the governing body of the corporation, whether designated as director, trustee, manager, governor, or by any other title.
- A(3) The address of the principal executive office of the corporation is the business street address at which the management of the corporation is located. A physical location must be stated. A P.O. Box cannot be substituted.
- A(4) Service of Process Address is the address to which the Secretary of State will forward any legal papers accepted on behalf of the corporation which commence a legal action against the corporation. Only complete this box if the address presently set forth in the department's records for the purpose as reflected in Part B(3) is to be changed.

INSTRUCTIONS FOR COMPLETING PART C

Signing Requirements - the statement must be signed by an officer, director, manager or owner of the corporation.

Complete the data in the witness clause.

IMPORTANT NOTICE

A New York Corporation which is no longer conducting business should file a Certificate of Dissolution pursuant to section 1003 of the Business Corporation Law, and a foreign corporation no longer conducting business in New York State should file a Surrender of Authority pursuant to section 1310 or a Termination of Existence pursuant to section 1311 of the Business Corporation Law. An inactive corporation continues to accrue tax liability and possible interest and penalties until formally dissolved, surrendered, or terminated. Questions regarding the filing of these certificates should be directed to the NYS Department of State, Division of Corporations, Albany, NY 12231-0001 or by calling 518-473-2492. You are also advised to request Publication 110, "Information and Instructions for Termination of Business Corporations" from the Department of Taxation and Finance. Requests for this publication may be made by phone within New York State by calling 1-800-462-8100 or from outside of New York State by calling (518) 438-1073. Mail requests should be addressed to: NYS Department of Taxation & Finance Taxpayer Assistance Bureau, W. A. Harriman Campus, Albany NY 12227.

Penalty - failure to timely file this statement will be reflected in the department's records as past due or delinquent and may later subject the corporation to a fine of \$250. See section 409 of the Business Corporation Law.

Filing Period - the filing period is the calendar month during which the original certificate of incorporation or application for authority was filed or the effective date that corporate existence began, if stated in the certificate of incorporation.

Filing Fee: The statutory filing fee is \$9.00. Checks and money orders must be made payable to the "Department of State." DO NOT mail cash.

Send entire form, completed, and with \$9.00 fee, in the self-mailer envelope, to the Department of State, Division of Corporations, Albany, NY 12231-0002.

Biennial Statement, Part C

IN WITNESS WHEREOF, this certificate has been subscribed this 2nd day of Sept, 1998, by the undersigned who affirms that the statements made herein are true under the penalties of perjury.

Helen W. Cornell
PRINT OR TYPE NAME OF SIGNER

Vice President, Corporate Secretary
PRINT OR TYPE SIGNER'S TITLE

Treasurer

Helen W. Cornell
SIGNATURE - OFFICER, DIRECTOR, MANAGER OR OWNER

MAKE NO MARKS BELOW THIS LINE

This form does not need to be notarized.