

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)/Execution Date(s):

TEXTRON

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

Citizenship (see guidelines) _____

Execution Date(s) March 1, 2005

Additional names of conveying parties attached? Yes No

3. Nature of conveyance:

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

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: Energy Mfg. Co., Inc.

Internal

Address: _____

Street Address: 204 Plastic Lane

City: Monticello

State: Iowa

Country: U.S.A. Zip: 523109470

- Association
 - General Partnership
 - Limited Partnership
 - Corporation
 - Other _____
- Citizenship _____

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)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

1,943,454

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

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

Name: Allan L. Harms

Internal Address: _____

Street Address: 2750 First Avenue N.E., Suite 420

City: Cedar Rapids

State: Iowa Zip: 52402

Phone Number: 319-363-8905

Fax Number: 319-363-8906

Email Address: _____

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$40.00

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

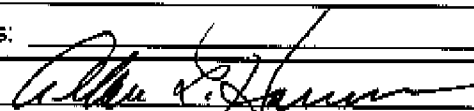
8. Payment Information:

a. Credit Card Last 4 Numbers _____
Expiration Date _____

b. Deposit Account Number 08-0725

Authorized User Name Allan L. Harms

9. Signature:


Signature

March 9, 2005

Date

Allan L. Harms

Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 2

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