FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name

DOCUMENT # 305431

(9)

ORDNANCE RESEARCH INC

Principal Place of Business	
135 ELDREDGE ROAD FORT WALTON BEACH FL 32547 US	-1346

Mailing Address

135 ELDREDGE ROAD FORT WALTON BEACH FL 32547-1346



3. Date incorporated or Qualified 3a. Date of Last Report

			05/25/1966	04/28/1995			
2. Principal Pla		2s. Mailing Address			4. FEI Number	Applied For	
21 120 M	DNAHAN DRIVE	26 120 MONAHAI) DRIVE		59-1143368	Not Applicable	
Suite, Apt. #		Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional	
	IL APT. 9B	27 CONSUL APT	. 98		5. Certificate of Status Desired	Fee Required	
City & State	LTON BEACH, FL	City & State 28 F7. WALTON	BEACH,	FL	Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
^{Zρ} 3254	7 Country USA	20 Zip 3 2 5 4 7	Country	SA	8. This corporation has liability for in		
₂₄ 3254		29 30		>/1	Florida Statutes	7-	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name							
			81 Na	ine:			
HAL R. WAITE 82 Street Address (P.O. Box Number is Not Acceptable)						(e)	
135 ELDREDGE ROAD				120 MONAHAN DRIVE			
FT. WALTON BCH FL 32548				CONSUL APT. 9B			
			84 Cit	y Fig.	WALJON BEACH	FL 85 Zip Code 32547	
11 Purcuant to	the provisions of Sections 607.0502 a	nd 607 1508 Florida Statutos 1	ho above name				
or registere	ed agent, or both, in the State of Florida	 Such change was authorized b 	by the corporation	on's board	of directors. I hereby accept the appo	bintment as registered agent. I am	
familiar with	n, and accept the obligations of, Section	1607.0505, Florida Statutes.					
SIGNATURE _	Signature, typed or printed name of registered agent an	d tille if applicable. (NOTE: P	legistered Agent signa	iture required v	when reinstating)	DATE:	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	ICERS AND DIRECTORS IN 12	
TITLÉ	PD	☐ DELETE	1 1 TITLE			Change Addition	
NAME	WAITE, HAL R		1.2 NAME				
STREET ADDRESS	ELDREDGE ROAD		1.3 STREET ADDR	ESS 12/	o monahan prive	CONSUL APT. 98	
CITY-ST-ZIP	FT WALTON BCH FL		1.4 CITY-ST-ZIP	F	. WALTON BEACH, P	L 32547	
TITLE	VST	☐ DELETE	2 1 TITLE			Change Addition	
NAME	WAITE,REBA M.		22 NAME			· I	
STREET ADDRESS	ELDREDGE ROAD		2.3 STREET ADDR	ESS 12	D MONAHAN PRIVE	CONTUL APT. 9B	
CHTY-ST-ZIP	FT WALTON BCH FL		24 CITY-ST-ZIP	F1	e walton beach , f	L 32547	
TITLE	D	☐ DELETE	3 1 TITLE			Change Addition	
NAME	EACHUS, CLARICE		3.2 NAME			•	
STREET ADDRESS	6334 N. TENTH STREET		3.3. STREET ADDR	IESS		i	
CITY-ST-ZIP	FRESNO CA		3.4 CITY - ST - ZIP				
TITLE		☐ DELETE	4. 1 TITLE			Change Addition	
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDR	ESS			
CITY-S1-ZIP			4.4 CITY - ST - ZIP				
TITLE		☐ DELETE	5. 1 71TLE			Change Addition	
NAME			5.2 NAME			1	
STREET ADDRESS			5.3 STREET ADDR	ESS			
CITY-SI-ZIP			5.4 CITY - ST - ZIP				
TITLE		☐ DELETE	6. 1 TITLE			Change Addytion	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDR	ESS			
CHTY-ST-ZIP			6.4 CITY - ST - ZIP				
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further contifut the information indirected on this applied project as it made under							
certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 (changed, or on an attachment with an address.							

SIGNATURE:

MUK Wail

HAL R. WATTE

4-25.96

904 862-0024

Daytimo Phone #

CR2E034 (12/95)