

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **823962** (6)

1. Corporation Name
TELEFLEX INCORPORATED



Principal Place of Business: **155 S. LIMERICK ROAD LIMERICK PA 19468**
Mailing Address: **155 S. LIMERICK ROAD LIMERICK PA 19468**

3. Date Incorporated or Qualified: **12/22/1969** 3a. Date of Last Report: **04/21/1995**
4. FEI Number: **23-1147939** Applied For: Not Applicable:
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23
2a. Mailing Address: 26, 27, 28
24. Zip: 25. Country: 29. Zip: 30. Country:

9. Name and Address of Current Registered Agent
**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City: **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent Signature Required When Applicable) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BECKMAN, D.	
STREET ADDRESS	155 S LIMERICK RD	
CITY - ST - ZIP	LIMERICK PA	
TITLE	VPS	<input type="checkbox"/> DELETE
NAME	CHANCE, STEVEN K.	
STREET ADDRESS	155 S LIMERICK RD	
CITY - ST - ZIP	LIMERICK PA	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	HORVATH, LOUIS T	
STREET ADDRESS	155 S LIMERICK RD	
CITY - ST - ZIP	LIMERICK PA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BOLDT, RONALD D.	
STREET ADDRESS	155 S LIMERICK RD	
CITY - ST - ZIP	LIMERICK PA	
TITLE	P	<input type="checkbox"/> DELETE
NAME	BOYER, DAVID S.	
STREET ADDRESS	155 S LIMERICK RD	
CITY - ST - ZIP	LIMERICK PA	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	BLACK, LENNOK K	
STREET ADDRESS	155 S LIMERICK RD	
CITY - ST - ZIP	LIMERICK PA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 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 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: **2/27/96** (610) 948-2870
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **Sandra B. Morton, Act. Sec.** Daytime Phone #

CR2E034 (12/95)

Name	Address
L.K. Black	630 W. Germantown Pike Plymouth Meeting, PA
L.E. Hatch, Jr.	2000 Red Maple Grove Ambler, PA 19002
P.E. Retzlaff	669 New Road Gilbertsville, PA 19102
D. Beckman	2900 One Liberty Place 1650 Market Street Phila., PA 19103
P. Hutchinson	700 The Bellevue, 200 S. Broad St. Phila., PA 19102
J.H. Remer	630 W. Germantown Pike Plymouth Meeting, PA 19462
J.W. Stratton	610 W. Germantown Pike, Suite 361 Plymouth Meeting, PA 19462
S.W. Lubsen	Elm and Lee Streets Conshohocken, PA 19428
D.S. Boyer	630 W. Germantown Pike Plymouth Meeting, PA 19462
J.S. Gonella	211 Country Club Lane Wallingford, PA 19086

Officers	Name	Address
Chairman	L.K. Black	155 S. Limerick Rd. Limerick, PA 19468
President	D. S. Boyer	630 W. Germantown Pike Plymouth Meeting, PA 19462
VP/Secr.	S. Chance	" "
VP/CFO	H. Zuber	" "
Asst. Treas.	T. M. Byrne	155 S. Limerick Rd Limerick, PA 19468
Asst. Secr	H. K. Zearfoss	" "