

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **839900** (8)
1. Corporation Name
DIVERSIFIED ELECTRONICS, INC. LEESBURG FACILITY



Principal Place of Business Mailing Address
1321 EDGAR ST. EVANSVILLE IN 47710

3. Date Incorporated or Qualified **01/25/1978** 3a. Date of Last Report **02/22/1995**
4. FEI Number **35-1134990** 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 2a. Mailing Address
21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.
22. City & State 27. City & State
23. Zip 28. Zip Country 29. Zip Country
24. 25. 29. 30.

9. Name and Address of Current Registered Agent
**WALLACE, GLYNN
320 EAST MAIN STREET
LEESBURG FL 32748**

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 (Signature typed or printed name of registered agent in Block 9 if the agent is not a registered agent) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

| | | | | |
|-------|------|---------------------|--|--------------------------|
| TITLE | NAME | STREET ADDRESS | CITY, ST, ZIP | DELETE |
| | CDT | STONE, JACK A | 1400 OLD NAT'L BANK BLDG. EVANSVILLE IN | <input type="checkbox"/> |
| | D | MOREHOUSE, ROBERT H | 11801 BROWNING RD EVANSVILLE IN | <input type="checkbox"/> |
| | PD | TORIAN, PAUL T | 800 SUNSET JANESVILLE, WIS 00000 | <input type="checkbox"/> |
| | VPD | ERICKSON, JAMES R | 1027 OAK HILL AVE JANESVILLE WI | <input type="checkbox"/> |
| | SD | KECK, DAVID M | 1402 OLD NAT'L BANK BLDG. EVANSVILLE, IN 00000 | <input type="checkbox"/> |
| | ATD | STONE, DOROTHY W | 1400 OLD NAT'L BANK BLDG. EVANSVILLE IN | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | | | | |
|-----------|----------|--------------------------|-------------------|--------------------------|--------------------------|
| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY, ST, ZIP | Change | Addition |
| | | SEE ATTACHED EXHIBIT "A" | | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY, ST, ZIP | Change | Addition |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY, ST, ZIP | Change | Addition |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY, ST, ZIP | Change | Addition |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY, ST, ZIP | Change | Addition |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY, ST, ZIP | Change | Addition |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

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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: *Jack A. Stone*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Jack A. Stone, Chairman

February 12, 1996 (812) 423-2045
Date Filing Fee

CR2E034 (12/95)

3-18-96

839900

DIVERSIFIED ELECTRONICS, INC.
CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE

ITEM 12

Officers and Directors
Diversified Electronics, Inc.

| | | | |
|-----------------------|--------|------------------------------|--------------------|
| Jack A. Stone | CH/D/T | 1400 Old Natl. Bank Bldg. | Evansville, IN |
| Paul T. Torian | P/D | 800 Sunset | Evansville, IN |
| James R. Erickson | VP/D | 1027 Oak Hill Ave. | Janesville, WI |
| David M. Keck | S/D | 1402 Old Natl. Bank Bldg. | Evansville, IN |
| Dorothy W. Stone | AT/D | 1400 Old Natl. Bank Bldg. | Evansville, IN |
| Karen Williams | AS | 1321 Edgar St. | Evansville, IN |
| Margaret S. Slaughter | D | 622 College Hwy. | Evansville, IN |
| Jack A. Stone, Jr. | D | 903 Malcolm Dr. | Silver Springs, MD |
| James W. Stone | D | 330 49th St. | Oakland, CA |
| Robert C. Stone | D | 3001 E. Bethel Lane | Bloomington, IN |
| Merle H. Gould | D | 5844 Stacer Rd. | Newburgh, IN |

EXHIBIT "A"