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Mar 11, 1999 8:00 am
Secretary of State

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05-09821

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 839900
 1. Corporation Name
DIVERSIFIED ELECTRONICS, INC. LEESBURG FACILITY



Principal Place of Business 1321 EDGAR ST. EVANSVILLE IN 47710	Mailing Address 1321 EDGAR ST. EVANSVILLE IN 47710
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 01/25/1978	4. FEI Number 35-1134990	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> - -	\$8.75 Additional Fee Required	
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
23 Zip	28 Zip	29 Country	30 Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

BURNSED, R D
1100 MAIN ST.
STE 211
LADY LAKE FL 32159

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CDT <input type="checkbox"/> DELETE	1.1 TITLE	CDT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STONE, JACK A	1.2 NAME	Stone, Jack A.
STREET ADDRESS	1400 OLD NAT'L BANK BLDG.	1.3 STREET ADDRESS	1400 Old Nat'l Bank Bldg.
CITY-ST-ZIP	EVANSVILLE IN	1.4 CITY-ST-ZIP	Evansville, IN 47708
TITLE	AS <input type="checkbox"/> DELETE	2.1 TITLE	AS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, KAREN	2.2 NAME	Williams, Karen
STREET ADDRESS	1321 EDGAR ST	2.3 STREET ADDRESS	1321 Edgar Street
CITY-ST-ZIP	EVANSVILLE IN	2.4 CITY-ST-ZIP	Evansville, IN 47710
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TORIAN, PAUL T	3.2 NAME	Torian, Paul T.
STREET ADDRESS	800 SUNSET	3.3 STREET ADDRESS	800 Sunset
CITY-ST-ZIP	JANESVILLE, WIS 00000	3.4 CITY-ST-ZIP	Evansville, IN 47713
TITLE	VPD <input type="checkbox"/> DELETE	4.1 TITLE	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ERICKSON, JAMES R	4.2 NAME	Erickson, James R.
STREET ADDRESS	1027 OAK HILL AVE	4.3 STREET ADDRESS	1027 Oak Hill Ave.
CITY-ST-ZIP	JANESVILLE WI	4.4 CITY-ST-ZIP	Janesville, WI 53545
TITLE	SD <input type="checkbox"/> DELETE	5.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KECK, DAVID M	5.2 NAME	Keck, David M.
STREET ADDRESS	1402 OLD NAT'L BANK BLDG.	5.3 STREET ADDRESS	1402 Old Nat'l Bank Bldg.
CITY-ST-ZIP	EVANSVILLE, IN 00000	5.4 CITY-ST-ZIP	Evansville, IN 47708
TITLE	ATD <input type="checkbox"/> DELETE	6.1 TITLE	ATD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STONE, DOROTHY W	6.2 NAME	Stone, Dorothy W.
STREET ADDRESS	1400 OLD NAT'L BANK BLDG.	6.3 STREET ADDRESS	1400 Old Nat'l Bank Bldg.
CITY-ST-ZIP	EVANSVILLE IN	6.4 CITY-ST-ZIP	Evansville, IN 47708

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: *Jack Stone* SIGNATURE REQUIRED *3/24/99* (812) 423-2045
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)

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215761-92067-47

FLORIDA

1999 PROFIT CORPORATION

ANNUAL REPORT

DIVERSIFIED ELECTRONICS, INC. LEESBURG FACILITY

ADDITIONAL SHEET

Block 13 (continued) Additional Officers

7.1	D	<input checked="" type="checkbox"/> Addition
7.2	Margaret S. Slaughter	
7.3	622 College Highway	
7.4	Evansville, IN 47714	
8.1	D	<input checked="" type="checkbox"/> Addition
8.2	Jack A. Stone, Jr.	
8.3	903 Malcolm Drive	
8.4	Silver Springs, MD 20901	
9.1	D	<input checked="" type="checkbox"/> Addition
9.2	James W. Stone	
9.3	c/o 1400 Old National Bank Building	
9.4	Evansville, IN 47708	
10.1	D	<input checked="" type="checkbox"/> Addition
10.2	Robert C. Stone	
10.3	3001 E. Bethel Lane	
10.4	Bloomington, IN 47408	
11.1	DS	<input checked="" type="checkbox"/> Addition
11.2	Merle H. Gould	
11.3	5844 Stacer Road	
11.4	Newburgh, IN 47630	
12.1	D	<input checked="" type="checkbox"/> Addition
12.2	Andrew N. Erickson	
12.3	2304 Dartmouth Drive	
12.4	Janesville, WI 53545	