

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90194 001 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F95000006098

1. Corporation Name
UNC PARTS COMPANY



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
 C/O UNC INC., TAX DEPT. P O BOX 2216
 175 ADMIRAL COCHRANE DR SCHENECTADY NY 12301-2216
 ANNAPOLIS MD 21401 US

3. Date Incorporated or Qualified
12/14/1995

4. FEI Number Applied For
52-1913036 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 owes the current year Intangible Personal Property Tax. 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 Country 28 Zip Country
 24 25 29 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DVP	<input type="checkbox"/> DELETE
NAME	BORNSTEIN, JEFFREY S	
STREET ADDRESS	1 NEUMANN WAY	
CITY-ST-ZIP	CINCINNATI OH 45215	
TITLE	S	<input type="checkbox"/> DELETE
NAME	HENDERSON, STEPHEN P	
STREET ADDRESS	1 NEUMANN WAY	
CITY-ST-ZIP	CINCINNATI OH 45215	
TITLE	P	<input type="checkbox"/> DELETE
NAME	VARESCHI, WILLIAM P	
STREET ADDRESS	1 NEUMANN WAY	
CITY-ST-ZIP	CINCINNATI OH 45215	
TITLE	AT	<input type="checkbox"/> DELETE
NAME	FAHEY, JAMES P	
STREET ADDRESS	175 ADMIRAL COCHRANE DR	
CITY-ST-ZIP	ANNAPOLIS MD	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	KROUPA, SHARON A	
STREET ADDRESS	175 ADMIRAL COCHRANE DR	
CITY-ST-ZIP	ANNAPOLIS MD	
TITLE	VPAT	<input type="checkbox"/> DELETE
NAME	YANOVER, FRANK	
STREET ADDRESS	12 CORPORATE WOODS BLVD	
CITY-ST-ZIP	ALBANY NY 12211	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	**SEE ATTACHED LIST**
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 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.

BARBARA A. MELITA

SIGNATURE: *Barbara A. Melita*

VP & ASST. TREASURER 4/21/99

518-433-4308

CR2E034 (11/98)

535483-90194-1
#F95000006098

For Year: 1998

#F95000006098

100097 UINC Parts Company
521913036

Name	Title	Business Address
Jeffrey S. Bornstein	Director	1 Neumann Way Cincinnati OH 45215 US
Jeffrey S. Bornstein	Vice President	1 Neumann Way Cincinnati OH 45215 US
Mark E. Buchanan	Assistant Treasurer	12 Corporate Woods Boulevard Albany NY 12211 US
Mark E. Buchanan	Vice President	12 Corporate Woods Boulevard Albany NY 12211 US
Steven Dunning	Treasurer	1 Neuman Way Cincinnati OH 45215 US
Jim Fahey	Assistant Treasurer	175 Admiral Cochrane Drive Annapolis 21401 US
Stephen P. Henderson	Secretary	1 Neumann Way Cincinnati OH 45215 US
Sharon A. Kroupa	Assistant Secretary	175 Admiral Cochrane Drive Annapolis MD 21113 US
Paul X. McLain	Assistant Vice President	175 Admiral Cochrane Drive Annapolis MD 21401 US
Barbara A. Melita	Assistant Treasurer	12 Corporate Woods Boulevard Albany NY 12211 US
Barbara A. Melita	Vice President	12 Corporate Woods Boulevard Albany NY 12211 US
William J. Vareschi	President	1 Neumann Way Cincinnati OH 45215
Frank Yanover	Assistant Treasurer	12 Corporate Woods Blvd. Albany NY 12211
Frank Yanover	Vice President	12 Corporate Woods Blvd. Albany NY 12211