

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

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # F97000006024

1. Corporation Name
REMEL INC.

Principal Place of Business
**12150 SANTA FE TRAIL DR.
 LENEXA KS 66215-3594**

Mailing Address
**12150 SANTA FE TRAIL DR.
 LENEXA KS 66215-3594**

2. Principal Place of Business

21 Suite, Apt. #, etc
 22 City & State
 23 Zip
 24 Country

2a. Mailing Address

26 c/o Sybron International Corp
 Suite, Apt. #, etc.
 27 411 E. Wisconsin Ave.
 City & State
 28 Milwaukee, WI
 Zip
 29 53202
 30 USA

9. Name and Address of Current Registered Agent

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

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 the applicant.

(NOTE: Registered Agent signature is not required.)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DC	[] DELETE
NAME	JELLINEK, FRANK H JR.	
STREET ADDRESS	48 CONGRESS ST.	
CITY-ST-ZIP	PORTSMOUTH NH 03801-4054	
TITLE	D	[] DELETE
NAME	LEATHE, JEFFREY C	
STREET ADDRESS	48 CONGRESS ST.	
CITY-ST-ZIP	PORTSMOUTH NH 03801-4054	
TITLE	D	[] DELETE
NAME	WIATT, STEPHEN K	
STREET ADDRESS	48 CONGRESS ST.	
CITY-ST-ZIP	PORTSMOUTH NH 03801-4054	
TITLE	P	[x] DELETE
NAME	SZTUKOWSKI, EDWARD	
STREET ADDRESS	12150 SANTA FE TRAIL DR.	
CITY-ST-ZIP	LENEXA KS 66215-3594	
TITLE	V	[] DELETE
NAME	NICHOLS, MARY	
STREET ADDRESS	12150 SANTA FE TRAIL DR.	
CITY-ST-ZIP	LENEXA KS 66215-3594	
TITLE	V	[x] DELETE
NAME	TAYLOR, ROBERT V	
STREET ADDRESS	12150 SANTA FE TRAIL DR.	
CITY-ST-ZIP	LENEXA KS 66215-3594	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[] Change [] Addition
12 NAME	
13 STREET ADDRESS	000002793560-0
14 CITY-ST-ZIP	-03/03/99-01075-004
21 TITLE	D/T
22 NAME	Leathe, Jeffrey C.
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[] Change [] Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	Ex Vice President
42 NAME	Roger Jensen
43 STREET ADDRESS	14000 Unity Street, NW
44 CITY-ST-ZIP	Ramsey, MN 55303
51 TITLE	Asst. Secretary
52 NAME	R. Jeffrey Harris
53 STREET ADDRESS	411 E. Wisconsin Ave., Suite 2400
54 CITY-ST-ZIP	Milwaukee, WI 53202
61 TITLE	Secretary
62 NAME	Gary J. Marmontello
63 STREET ADDRESS	48 Congress Street
64 CITY-ST-ZIP	Portsmouth, NH 03801

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

SIGNATURE: *Jeffrey C. Leathe* Jeffrey C. Leathe, 2/10/99 (414)274-6620
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0530230

CR2E034 (11/98)