

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P23678** (6)

1. Corporation Name
MKS INSTRUMENTS, INC.



Principal Place of Business: **SIX SHATTUCK ROAD ANDOVER MA 01810-2495 US**
Mailing Address: **SIX SHATTUCK RD ANDOVER MA 01810-2495 US**

3. Date Incorporated or Qualified: **03/31/1989** 3a. Date of Last Report: **03/06/1995**
4. FEI Number: **04-2277512** 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 State, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country; 25
2a. Mailing Address: 26 State, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country; 30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. 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; 85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.0503, 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 607.0503, Florida Statutes.

SIGNATURE: **NIA**

12. OFFICERS AND DIRECTORS

11. TITLE	PD	<input type="checkbox"/> DELETE
12. NAME	BERTUCCI, JOHN	
13. STREET ADDRESS	SIX SHATTUCK ROAD	
14. CITY, ST., ZIP	ANDOVER MA	
15. TITLE	V	<input type="checkbox"/> DELETE
16. NAME	WEIGNER, RONALD	
17. STREET ADDRESS	SIX SHATTUCK ROAD	
18. CITY, ST., ZIP	ANDOVER MA	
19. TITLE	SD	<input type="checkbox"/> DELETE
20. NAME	CHUTE, RICHARD	
21. STREET ADDRESS	ONE INTERNATIONAL PLACE	
22. CITY, ST., ZIP	BOSTON MA	
23. TITLE	D	<input type="checkbox"/> DELETE
24. NAME	BERTUCCI, CLAIRE	
25. STREET ADDRESS	SIX SHATTUCK ROAD	
26. CITY, ST., ZIP	ANDOVER MA	
27. TITLE	T	<input type="checkbox"/> DELETE
28. NAME	O'BRIEN, ROBERT	
29. STREET ADDRESS	SIX SHATTUCK ROAD	
30. CITY, ST., ZIP	ANDOVER MA	
31. TITLE	V	<input type="checkbox"/> DELETE
32. NAME	SULLIVAN, JOHN	
33. STREET ADDRESS	SIX SHATTUCK ROAD	
34. CITY, ST., ZIP	ANDOVER MA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST., ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntary, true and correct and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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, changes I, or on an attachment with an address.

SIGNATURE:

Robert E. O'Brien
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT E. O'BRIEN - TREASURER

2/21/96

(508) 945-2350

CR2E034 (12/95)