

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 9:54

DOCUMENT # P24174 (5)

1. Corporation Name
AHLSTROM PYROPOWER CUSTOMER SERVICES, INC.

Principal Place of Business Mailing Address
8925 REHCO ROAD 2646 S LOOP W-
P.O. BOX 85480 STE 565
SAN DIEGO CA 92121-3269 HOUSTON TX 77054
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/04/1989 3a. Date of Last Report 04/28/1994
4. FEI Number 76-0271671 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 26 P.O. Box 85480
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28 San Diego, CA
Zip Country Zip Country
24 25 29 92186-5480 30 U.S.A.

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
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 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 _____ DATE _____
Signature, typed or printed name of registered agent and that of applicable NOTE: Registered Agent signature required when reappointing

12. OFFICERS AND DIRECTORS	
TITLE	R
NAME	LINCK, F.E.
STREET ADDRESS	2646 SOUTH LOOP W #565
CITY - ST - ZIP	HOUSTON TX
TITLE	SD
NAME	LESTYK, JOSEPH A
STREET ADDRESS	8925 REHCO RD.
CITY - ST - ZIP	SAN DIEGO CA
TITLE	K
NAME	KOHONEN, KARI
STREET ADDRESS	8925 REHCO ROAD
CITY - ST - ZIP	SAN DIEGO CA
TITLE	D
NAME	BOHLIM, RICHARD C.
STREET ADDRESS	8925 REHCO RD
CITY - ST - ZIP	SAN DIEGO CA
TITLE	D
NAME	DAUL, G.W.
STREET ADDRESS	8925 REHCO ROAD
CITY - ST - ZIP	SAN DIEGO CA
TITLE	D
NAME	MAYERS, GERALD C.
STREET ADDRESS	8925 REHCO ROAD
CITY - ST - ZIP	SAN DIEGO CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Div Gen Mgr <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Linck, F. E.
1.3 STREET ADDRESS	18333 Egret Bay Blvd, Suite 270
1.4 CITY - ST - ZIP	Houston, TX 77058
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	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Pulkkinen, Teuvo
5.3 STREET ADDRESS	8925 Rehco Road
5.4 CITY - ST - ZIP	San Diego, CA 92121-3269
6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	James D. Murphy
6.3 STREET ADDRESS	8925 Rehco Road
6.4 CITY - ST - ZIP	San Diego, CA 92121-3269

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)(b), 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: Joseph A. Lestyk Joseph A. Lestyk 2/10/95 619/458-3020
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR (Indicate Page #)

AHLSTROM PYROPOWER CUSTOMER SERVICES

Additional Officers and Directors

D

**Bell, Denis J.
8925 Rehco Road
San Diego, CA 92121-3269**

T

**Sentz, Dennis N.
8925 Rehco Road
San Diego, CA 92121-3269**

AS

**Gildred, Julie A.
8925 Rehco Road
San Diego, CA 92121-3269**