

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P92000014247 (0)

1. Corporation Name
FARO TECHNOLOGIES, INC.



Principal Place of Business
125 TECHNOLOGY PARK
LAKE MARY FL 32746

Mailing Address
125 TECHNOLOGY PARK
LAKE MARY FL 32746

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/28/1992

4. FEI Number

59-3157093

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ 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

SCHLOSSER, RICHARD A
101 E. KENNEDY BLVD.
SUITE 4100
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

Martin A. Traber

82 Street Address (P.O. Box Number is Not Acceptable)

Foley & Gardner

83

100 North Tampa St #2700

84 City

Tampa

FL

85 Zip Code
33602

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

7/27/98

12. OFFICERS AND DIRECTORS

TITLE DP
NAME RAAB, SIMON
STREET ADDRESS 125 TECHNOLOGY PARK
CITY-ST-ZIP LAKE MARY FL ☐ DELETE

TITLE DST
NAME FRASER, GREGORY A
STREET ADDRESS 125 TECHNOLOGY PARK
CITY-ST-ZIP LAKE MARY FL ☐ DELETE

TITLE D
NAME D'AMOURS, HUBERT
STREET ADDRESS 393 RUE SAINT-JACQUES O #258
CITY-ST-ZIP MONTREAL QU ☐ DELETE

TITLE D
NAME COLLEY, PHILIP R
STREET ADDRESS 4501 HWY 7 E
CITY-ST-ZIP UNIONVILLE, ONTARIO ☐ DELETE

TITLE D
NAME JULIEN, ANDRE
STREET ADDRESS 1925 32ND AVE
CITY-ST-ZIP LACHINE QU ☐ DELETE

TITLE D
NAME KOSAR, MARTIN M
STREET ADDRESS 15318 VINOLA PLACE
CITY-ST-ZIP MONTVERDE FL ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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.

SIGNATURE

(402) 333-0911

CR2E034 (5/98)