


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

Amended 10/22

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED
97 OCT 29 PM 5:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **366491**
1. Corporation Name
CarlanKillam Consulting Group, Inc.

Principal Place of Business: **5111 North 12th Avenue, PENSACOLA, FL 32513**
Mailing Address: **c/o Thermo Electron Corporation, Tax Department, 81 Wyman Street, Waltham, MA 02254**

| | |
|--------------------------------|-------------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21. Same as above | 26. Same as above |
| 22. Suite, Apt. #, etc. | 27. Suite, Apt. #, etc. |
| 23. City & State | 28. City & State |
| 24. Zip | 29. Zip |
| 25. Country | 30. Country |

| | |
|---|--|
| 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 07/01/70 | 06/10/97 |
| 4. FEI Number | Applied For |
| 59-1294824 | 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 <input type="checkbox"/> No <input type="checkbox"/> |

9. Name and Address of Current Registered Agent
**CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324**

10. Name and Address of New Registered Agent

| | |
|--|--------------|
| 81. Name | 85. Zip Code |
| 82. Street Address (P.O. Box Number is Not Acceptable) | FL |
| 83. | |
| 84. City | |

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 607.0502, Florida Statutes.

SIGNATURE: *Conie Bryan* **CONIE BRYAN**
SPECIAL ASSISTANT SECRETARY
DATE: **10/29/97**

12. OFFICERS AND DIRECTORS

| | |
|----------------|---------------------------------|
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|--------------------|------------------------|--|
| 1.1 TITLE | Assistant Secretary | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME | Albert N. Beninato | |
| 1.3 STREET ADDRESS | 1000 Willowbrook Drive | |
| 1.4 CITY-ST-ZIP | Freehold, NJ 07728 | |
| 2.1 TITLE | Assistant Secretary | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | Charles G. Baxley | |
| 2.3 STREET ADDRESS | 5021 Ponitz Way | |
| 2.4 CITY-ST-ZIP | Pace, FL | |
| 3.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | 800002332448--B | |
| 3.3 STREET ADDRESS | -10/29/97--01063--001 | |
| 3.4 CITY-ST-ZIP | *****61.25 *****61.25 | |

14. I do 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: *Robert U. [Signature]*
DATE: **10-21-97** 617-622-1000 **10/29/97**

CR2E034 (9/96)

ADDITIONAL OFFICERS

2 of 2

10/29/97 OFFICER/DIRECTOR DETAIL SCREEN 3:59 PM
CORP NUMBER: 366491 CORP NAME: CARLANKILLAM CONSULTING GROUP, INC.
TITLE: D NAME: WILLIAMSON, FRANKLIN O JR.
27 BLEEKER ST.
MILLBURN, NJ 07041
TITLE: PD NAME: CARLAN, CHARLES H.
5111 NORTH 12TH AVE.
PENSACOLA, FL 32513-2518
TITLE: AS NAME: AGHABABIAN, ROBERT V
81 WYMAN STREET.
WALTHAM, MA 02254
TITLE: D NAME: HERKERT, EMIL C
27 BLEEKER ST.
MILLBURN, NJ 07041
TITLE: T NAME: PAINTER, JONATHAN W
THERMO ELECTRIC CORP. 81 WYMAN STREET
WALTHAM, MA 02254
TITLE: S NAME: LAMBERT, SANDRA L
81 WYMAN STREET
WALTHAM, MA 02254