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 MAR 30 AM 10:52

DOCUMENT # **397409** **(4)**

1. Corporation Name
ELECTRO CORPORATION

Principal Place of Business	Mailing Address
1845 57TH ST. SARASOTA FL 34243	1845 57TH ST. SARASOTA FL 34243

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
03/14/1972	04/29/1994

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

4. FEI Number
36-2113815
☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM **1200 S. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when necessary)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	11 TITLE	☐ Change ☐ Addition
NAME	RAGAN, J.	12 NAME	
STREET ADDRESS	700 NARRAGANSETT PARK DR	13 STREET ADDRESS	
CITY ST ZIP	PAWTUCKET RI	14 CITY-ST-ZIP	
TITLE	P	21 TITLE	☐ Change ☐ Addition
NAME	ANDERSON, STEVEN	22 NAME	
STREET ADDRESS	1845 57 ST	23 STREET ADDRESS	
CITY ST ZIP	SARASOTA FL	24 CITY ST ZIP	
TITLE	VPT	31 TITLE	☐ Change ☐ Addition
NAME	PICONE, ANTHONY V	32 NAME	
STREET ADDRESS	700 NARRAGANSETT PK DR	33 STREET ADDRESS	
CITY ST ZIP	PAWTUCKET RI	34 CITY ST ZIP	
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	DEVYLDER, EDGAR	42 NAME	
STREET ADDRESS	750 MAIN ST	43 STREET ADDRESS	
CITY ST ZIP	STAMFORD CN	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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)(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 above, or on an attachment with an address.

SIGNATURE: Steven Anderson/President 3/14/95 (813)355-8411
INDIVIDUAL'S NAME AND TITLE OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0048277 CP