

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

FILED
Mar 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 428389 (1)

1. Corporation Name
MCMAHAN ELECTRO-OPTICS, INC.



Principal Place of Business 2160 PARK AVENUE NORTH WINTER PARK FL 32789	Mailing Address 2160 PARK AVENUE NORTH WINTER PARK FL 32789-2397
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2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
24	29
Country	Country
25	30

3. Date Incorporated or Qualified 06/13/1973	3a. Date of Last Report 04/29/1996
4. FEI Number 59-1469410	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MCMAHAN, ROBERT K.
 900 VIRGINIA DR.
 WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12
TITLE	PD	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCMAHAN, ROBERT K.	1.2 NAME
STREET ADDRESS	900 VIRGINIA DR.	1.3 STREET ADDRESS
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP
TITLE	D	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCMAHAN, BARBARA G.	2.2 NAME
STREET ADDRESS	900 VIRGINIA DR.	2.3 STREET ADDRESS
CITY-ST-ZIP	WINTER PARK FL	2.4 CITY-ST-ZIP
TITLE	D	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCMAHAN, JR. ROBERT	3.2 NAME
STREET ADDRESS	5414 OAK GROVE CHURCH RD	3.3 STREET ADDRESS
CITY-ST-ZIP	MEBANE NC	3.4 CITY-ST-ZIP
TITLE		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS
CITY-ST-ZIP		4.4 CITY-ST-ZIP
TITLE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 _____ DATE **3/16/97** (107) (45-1800)

CR2E034 (9/96)