

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

FILED
Feb 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **445678** (6)
1. Corporation Name
RELM COMMUNICATIONS OF FLORIDA, INC.

Principal Place of Business 7505 TECHNOLOGY DRIVE WEST MELBOURNE FL 32904	Mailing Address 7505 TECHNOLOGY DR W MELBOURNE FL 32904 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 03/25/1974	
		4. FEI Number 59-1519158		Applied For 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent KELLY, WILLIAM P 7505 TECHNOLOGY DR W MELBOURNE FL 32904		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	
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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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHECKE, FRED F	1.2 NAME	
STREET ADDRESS	7505 TECHNOLOGY DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32904	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOLLAND, ROBERT T	2.2 NAME	CEO
STREET ADDRESS	7505 TECHNOLOGY DR.	2.3 STREET ADDRESS	RICHARD LAIRD
CITY-ST-ZIP	MELBOURNE FL 32904	2.4 CITY-ST-ZIP	7505 TECHNOLOGY DR
TITLE	CFO	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLY, WILLIAM	3.2 NAME	
STREET ADDRESS	7505 TECHNOLOGY DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST MELBOURNE FL	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOEBERT, DONALD	4.2 NAME	
STREET ADDRESS	7505 TECHNOLOGY DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST MELBOURNE FL	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENGLERT, JOHN	5.2 NAME	
STREET ADDRESS	7707 RECORDS STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	INIANAPOLIS IN	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 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:

F.P. Kelly

1/13/98

407-953-7898

CR2E034 (10/97)