

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

FILED

May 01 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 # 605429 (0)
1. Corporation Name
SAWTEK INC.



Principal Place of Business
1818 S HWY 441
APOPKA FL 32703

Mailing Address
P.O. BOX 608501
ORLANDO FL 32860-9501
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/03/1979	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 59-1864440	Applied For Not Applicable
23 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
24		28		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent MILLER, STEVEN P 1818 SOUTH HIGHWAY 441 APOPKA FL 32703				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	
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

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	PTD	1.1 TITLE	C/D
NAME	MILLER, STEVEN P.	1.2 NAME	MILLER, STEVEN P.
STREET ADDRESS	1818 S. HIGHWAY 441	1.3 STREET ADDRESS	1818 S. HIGHWAY 441
CITY-ST-ZIP	APOPKA, FL 0	1.4 CITY-ST-ZIP	APOPKA, FL
TITLE	V	2.1 TITLE	P
NAME	MONETTI, GARY O	2.2 NAME	MONETTI, GARY O.
STREET ADDRESS	1818 S. HIGHWAY 441	2.3 STREET ADDRESS	1818 S. HIGHWAY 441
CITY-ST-ZIP	APOPKA FL	2.4 CITY-ST-ZIP	APOPKA, FL
TITLE	VD	3.1 TITLE	D
NAME	SHOQUIST, THOMAS L.	3.2 NAME	YOUNG, WILLIS C.
STREET ADDRESS	1818 S. HIGHWAY 441	3.3 STREET ADDRESS	1818 S. HIGHWAY 441
CITY-ST-ZIP	APOPKA FL	3.4 CITY-ST-ZIP	APOPKA, FL
TITLE	VD	4.1 TITLE	D
NAME	TOLAR, NEAL J.	4.2 NAME	STRANDBERG, ROBERT C.
STREET ADDRESS	1818 S. HIGHWAY 441	4.3 STREET ADDRESS	1818 S. HIGHWAY 441
CITY-ST-ZIP	APOPKA FL	4.4 CITY-ST-ZIP	APOPKA, FL
TITLE	V	5.1 TITLE	D
NAME	LINK, RAYMOND A	5.2 NAME	WHITE, BRUCE S.
STREET ADDRESS	1818 S HWY 441	5.3 STREET ADDRESS	1818 S. HIGHWAY 441
CITY-ST-ZIP	APOPKA FL	5.4 CITY-ST-ZIP	APOPKA, FL
TITLE	D	6.1 TITLE	S
NAME	GRIMM, WILLIAM	6.2 NAME	GRIMM, WILLIAM
STREET ADDRESS	1818 S HWY 441	6.3 STREET ADDRESS	1818 S. HIGHWAY 441
CITY-ST-ZIP	APOPKA FL	6.4 CITY-ST-ZIP	APOPKA, FL

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:

Raymond A. Link VP Raymond A. Link 4/17/98 441 894-32111

CR2E034 (10/97)