

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 13 AM 9:27

DOCUMENT # **612755** (9)

1. Corporation Name
LEHMAN MANUFACTURING COMPANY, INC.

Principal Place of Business Mailing Address
3700 NE 6TH DRIVE **3700 NE 6TH DRIVE**
BOCA RATON FL 33431 **BOCA RATON FL 33431**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
03/13/1979 **01/19/1994**

4. FEI Number Applied For
22-1868987 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21. 26.

22. Suite, Apt. #, etc. 27. Suite, Apt. #, etc.

23. City & State 28. City & State

24. Zip 25. Country 29. Zip 30. Country

9. Name and Address of Current Registered Agent

LEHMAN, ROGER
3700 NE 6TH DRIVE
BOCA RATON, FL
33431

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City 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 of registered agent and the registered agent, if the registered agent signature required after filing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11.1 TITLE	PD	11.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.2 NAME	LEHMAN, ROGER	11.2 NAME	
11.3 STREET ADDRESS	3700 NE 6TH DR	11.3 STREET ADDRESS	
11.4 CITY, ST, ZIP	BOCA RATON, FL 00000	11.4 CITY, ST, ZIP	
11.5 TITLE	VSD	11.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.6 NAME	LEHMAN, JEANNE A	11.6 NAME	
11.7 STREET ADDRESS	3700 NE 6TH DR	11.7 STREET ADDRESS	
11.8 CITY, ST, ZIP	BOCA RATON, FL 00000	11.8 CITY, ST, ZIP	
11.9 TITLE	D	11.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.10 NAME	LEHMAN, JOAN T	11.10 NAME	
11.11 STREET ADDRESS	78 LAIGHT ST	11.11 STREET ADDRESS	
11.12 CITY, ST, ZIP	NEW YORK NY	11.12 CITY, ST, ZIP	
11.13 TITLE		11.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.14 NAME		11.14 NAME	
11.15 STREET ADDRESS		11.15 STREET ADDRESS	
11.16 CITY, ST, ZIP		11.16 CITY, ST, ZIP	
11.17 TITLE		11.17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.18 NAME		11.18 NAME	
11.19 STREET ADDRESS		11.19 STREET ADDRESS	
11.20 CITY, ST, ZIP		11.20 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing voluntarily furnished and that it qualifies for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information contained in 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 person or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: _____

ROGER LEHMAN

1/9/95
407-393-4687