

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

**FILED**  
**Jan 29 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 837203 (9)**

1. Corporation Name  
**PIONEER-STANDARD OF MARYLAND, INC.**



Principal Place of Business <b>4800 EAST 131ST STREET                  CLEVELAND OH 44105</b>	Mailing Address <b>4800 EAST 131ST STREET                  CLEVELAND OH 44105-7132</b>
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>10/18/1976</b>	3a. Date of Last Report <b>08/07/1996</b>
21. State, Apt. #, etc.	26. State, Apt. #, etc.	4. FEI Number <b>52-0797364</b>	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24. Country	29. Country	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		10. Name and Address of New Registered Agent	
<b>CT CORPORATION SYSTEM                  1200 S PINE ISLAND RD                  PLANTATION FL 33324</b>		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. City	<b>FL</b> 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 reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>CHAIRMAN, PRESIDENT &amp; CEO</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BAYMAN, JAMES L</b>	1.2 NAME	<b>BAYMAN, JAMES L.</b>
STREET ADDRESS	<b>4800 EAST 131ST STREET</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CLEVELAND OH 44105</b>	1.4 CITY-ST-ZIP	
TITLE	<b>T</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GOODGER, JOHN V</b>	2.2 NAME	
STREET ADDRESS	<b>4800 EAST 131ST STREET</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CLEVELAND OH 44105</b>	2.4 CITY-ST-ZIP	
TITLE	<b>S</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PAPENBROCK, WILLIAM A</b>	3.2 NAME	
STREET ADDRESS	<b>800 SUPERIOR AVE SUITE 1400</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CLEVELAND OH 44114</b>	3.4 CITY-ST-ZIP	
TITLE	<b>CFO</b> <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RYBOS, CHARLES G.</b>	4.2 NAME	
STREET ADDRESS	<b>9100 GAITHER ROAD</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>GAITHERSBURG MD</b>	4.4 CITY-ST-ZIP	
TITLE	<b>STD</b> <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>JONES, JAMES A SR</b>	5.2 NAME	
STREET ADDRESS	<b>9100 GAITHER ROAD</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>GAITHERSBURG MD</b>	5.4 CITY-ST-ZIP	
TITLE	<b>V</b> <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROSS, JAY</b>	6.2 NAME	
STREET ADDRESS	<b>9100 GAITHER RD</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>GAITHERSBURG MD</b>	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)(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: *John V. Goodger* **JOHN V. GOODGER** 1-10-97 (216) 587-3600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

**PIONEER-STANDARD MARYLAND, INC.**  
**BOARD OF DIRECTORS**  
**Federal ID No. 52-0797364**  
**SIC Code 5060**

	<u>Business</u>	<u>Residence</u>
James L. Bayman Director	4800 East 131st Street Cleveland, OH 44105 (216) 587-3600 FAX: (216) 587-3563	2749 Cranlyn Road Shaker Hts., Ohio 44022 (216) 464-3264
Arthur Rhein Director	4800 East 131st Street Cleveland, OH 44105 (216) 587-3600 FAX: (216) 498-6767	40 Stonehill Lane Moreland Hills, OH 44022 (216) 247-1642

**PIONEER-STANDARD MARYLAND, INC.**  
**CORPORATE OFFICERS**

	<u>Business</u>	<u>Residence</u>
James L. Bayman President	Pioneer-Standard Electronics, Inc. 4800 East 131st Street Cleveland, OH 44105 (216) 587-3600 Fax: (216) 587-3563	2749 Cranlyn Road Shaker Hts., OH 44022 (216) 464-3264
John V. Goodger Treasurer	Pioneer-Standard Electronics, Inc. 4800 East 131st Street Cleveland, OH 44105 (216) 587-3600 Fax: (216) 587-3563	104 Manor Brook Drive Chagrin Falls, OH 44022 (216) 338-3823
William A. Papenbrock Secretary	Calfee, Halter & Griswold 1400 McDonald Investment Center 800 Superior Avenue Cleveland, OH 44114-2688	14074 Fox Hollow Drive Novelty, OH 44072 (216) 338-8477