FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 837500 (8)

1. Corporation Name

AMERICAN ELECTROPLATERS AND SURFACE FINISHERS SO CIETY, INC.

Principal Place of Business	Mailing Address
12644 RESEARCH PARKWAY ORLANDO FL 32826	12644 RESEARCH PARKWAY ORLANDO FL 32826

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/07/1976
3a. Date of Last Report: 04/27/1994
4. FEI Number: 22-1520640 — Applied For / Not Applicable

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

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status [X] — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes [X] No

9. **Name and Address of Current Registered Agent**

WITT, TED
12644 RESEARCH PARKWAY
ORLANDO FL 32826

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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	P/D [X] Change ☐ Addition
NAME	MASON, BJ	12 NAME	BONIVERT, WILLIAM D
STREET ADDRESS	4656 ADDISON RD.	13 STREET ADDRESS	2077 VINTAGE LANE
CITY ST ZIP	CAPITOL HEIGHTS MD	14 CITY ST ZIP	LIVERMORE CA 94550
TITLE	SD	21 TITLE	S/D [X] Change ☐ Addition
NAME	WITT, TED	22 NAME	WITT, TED
STREET ADDRESS	7418 KEY COLONY AVE.	23 STREET ADDRESS	3100 McEWAN LANE
CITY ST ZIP	WINTER PARK FL	24 CITY ST ZIP	ORLANDO FL 32812
TITLE	TD	31 TITLE	☐ Change ☐ Addition
NAME	TILTON, HERBERT	32 NAME	
STREET ADDRESS	66 PASSIAC AVE.	33 STREET ADDRESS	
CITY ST ZIP	FAIRFIELD NJ	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ted Witt — TED WITT — 4/26/95 (Date) — 407/281-6441 (Daytime Phone #)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

00344896