

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 839529

(5)

1. Corporation Name

SPACELABS MEDICAL, INC.

Principal Place of Business

15220 NE 40TH ST
REDMOND WA 98052
US

Mailing Address

PO BOX 97013
REDMOND WA 98073
US

FILED
May 15 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/15/1977

4. FEI Number

95-2058575

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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, if not the applicant)

(Include Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PD LOMBARDI, CARL
15220 NE 40TH ST
REDMOND WA

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SD DEFELICE, EUGENE
15220 NE 40TH ST
REDMOND WA

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V LARSEN, DENNIS E
15220 NE 40TH ST.
REDMOND WA 98052

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V PELIKAN, GLENN W
5220 NE 40TH ST.
REDMOND WA 98052

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V LARSEN, EDWARD R
15220 NE 40TH ST.
REDMOND WA 98052

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VD RICHMAN, JAMES A.
15220 NE 40TH ST
REDMOND WA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

4. 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, 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, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/98

(415) 882-3700

Date

Daytime Phone # 0633140

CR2E034 (10/97)

**Attachment to
Florida Department of State
Corporation Annual Report 1998 for
SpaceLabs Medical, Inc.**

Continuation of Block 12

<u>Title</u>	<u>Name</u>	<u>Street Address</u>	<u>City and State</u>
7. V	Conti, Luis	15220 N.E. 40th Street	Redmond, WA
8. V	Hall, John	15220 N.E. 40th Street	Redmond, WA
9. V	Mathews, Paul	15220 N.E. 40th Street	Redmond, WA
10. V	Miskimon, Timothy	15220 N.E. 40th Street	Redmond, WA
11. V	Werrbach, Robert	15220 N.E. 40th Street	Redmond, WA
13. A/S	Hughlett, William	15220 N.E. 40th Street	Redmond, WA
14. A/S	West, Clay	15220 N.E. 40th Street	Redmond, WA
15. A/S	Brewer, Lori	15220 N.E. 40th Street	Redmond, WA