

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

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
JAMES B. MATHIAS  
GOVERNOR  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

**DOCUMENT # 840852**

**(8)**

95 MAY -1 PM 2:28

**THE FAIRFIELD ENGINEERING COMPANY**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                                   |                                                   |
|---------------------------------------------------|---------------------------------------------------|
| Principal Place of Business                       | Mailing Address                                   |
| 324 BARNHART ST.<br>PO BOX 526<br>MARION OH 43302 | 324 BARNHART ST.<br>PO BOX 526<br>MARION OH 43302 |

DO NOT WRITE IN THIS SPACE

|                                |  |                       |  |                                                                                                                                                     |  |                                                        |  |
|--------------------------------|--|-----------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|--|
| 2. Principal Place of Business |  | 2a. Mailing Address   |  | 3. Date incorporated or qualified<br><b>06/14/1978</b>                                                                                              |  | 3a. Date of Last Report<br><b>05/01/1994</b>           |  |
| 21. State Apt. # etc.          |  | 26. State Apt. # etc. |  | 4. FFI Number<br><b>31-4176470</b>                                                                                                                  |  | Applied For<br><input type="checkbox"/> Not Applicable |  |
| 22. City & State               |  | 27. City & State      |  | 5. Certificate of Status Desired <input type="checkbox"/>                                                                                           |  | <b>\$8.75 Additional Fee Required</b>                  |  |
| 23. For Country                |  | 28. For Country       |  | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                  |  | <b>\$5.00 May Be Added to Fees</b>                     |  |
| 24. For Country                |  | 29. For Country       |  | 8. This corporation has liability for intangible tax under S. 199.012,<br>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           |  |  |  |
| HOHE, NAOMI<br>434 BEVERLY AVE.<br>PORT CHARLOTTE FL 33952 |  |  |  | 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 607.0603 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 607.0603, Florida Statutes.

SIGNATURE

|                            |                  |                                |                      |                                                       |           |                     |                    |
|----------------------------|------------------|--------------------------------|----------------------|-------------------------------------------------------|-----------|---------------------|--------------------|
| 12. OFFICERS AND DIRECTORS |                  |                                |                      | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |           |                     |                    |
| 12a. TITLE                 | 12b. NAME        | 12c. STREET ADDRESS            | 12d. CITY, ST. ZIP   | 13a. TITLE                                            | 13b. NAME | 13c. STREET ADDRESS | 13d. CITY, ST. ZIP |
|                            | D<br>WALKER, J H | 1155 CHAMPAGNE DR              | MARION, OH 00000     |                                                       |           |                     |                    |
|                            | SD               | DELA TE BARNHOUSE AS SECRETARY | 4018 HILLMAN-FORD RD |                                                       |           |                     |                    |
|                            | PDT              | WALKER, J.L.                   | 1922 CHAPEL HTS.RD.  |                                                       |           |                     |                    |
|                            | AS               | HOUSE, J. E.                   | 645 HENRY STREET     |                                                       |           |                     |                    |
|                            |                  |                                |                      |                                                       |           |                     |                    |
|                            |                  |                                |                      |                                                       |           |                     |                    |
|                            |                  |                                |                      |                                                       |           |                     |                    |
|                            |                  |                                |                      |                                                       |           |                     |                    |
|                            |                  |                                |                      |                                                       |           |                     |                    |

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193.021(1)(b), Florida Statutes. I further certify that this information is indicated on this annual report or supplemental annual report as true and correct 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 make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this document, as an attachment with an address.

**SIGNATURE:**

*J.L. Walker*  
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

J.L. Walker, Treas. 4/28/95 614-387-3327