SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 28 AM 9:14

DOCUMENT # **846721** **(9)**

1. Corporation Name
SIMPLIMATIC ENGINEERING COMPANY

Principal Place of Business	Mailing Address
1320 WARD'S FERRY RD. P. O. BOX 11709 LYNCHBURG VA 24502	1320 WARD'S FERRY RD. P. O. BOX 11709 LYNCHBURG VA 24502

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/14/1980	3a. Date of Last Report: 06/28/1994
4. FEI Number: 54-0795235	☐ Applied For ☐ Not Applicable
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. 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
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYES ST, STE 105
TALLAHASSEE FL 32301

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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	D ☒ Change ☐ Addition
NAME	POULTON, GERALD A	12 NAME	Dennis J. Jaisle
STREET ADDRESS	1320 WARDS FERRY RD.	13 STREET ADDRESS	1320 Wards Ferry Road
CITY-ST-ZIP	LYNCHBURG VA 24502	14 CITY-ST-ZIP	Lynchburg, VA 24502
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	POWELL, DAVID M	22 NAME	
STREET ADDRESS	DENCHWORTH RD., WANTAGE	23 STREET ADDRESS	
CITY-ST-ZIP	OXFORDSHIRE OX22 9BP ENGLAND	24 CITY-ST-ZIP	
TITLE	VT	31 TITLE	VP, Chief Financial Officer ☒ Change ☐ Addition
NAME	COBLENTZ, GILBERT S	32 NAME	Gary E. Vaughan
STREET ADDRESS	1320 WARDS FERRY RD.	33 STREET ADDRESS	1320 Wards Ferry Road
CITY-ST-ZIP	LYNCHBURG VA 24502	34 CITY-ST-ZIP	Lynchburg, VA 24502
TITLE	V	41 TITLE	☐ Change ☐ Addition
NAME	PARKER, JAMES W	QUEST NO.	
STREET ADDRESS	1320 WARDS FERRY RD.	43 STREET ADDRESS	
CITY-ST-ZIP	LYNCHBURG VA 24502	ACCT. NO. 44 CITY-ST-ZIP	
TITLE	V	51 TITLE	☐ Change ☐ Addition
NAME	EAST, JERRY L	52 NAME	
STREET ADDRESS	1320 WARDS FERRY RD.	53 STREET ADDRESS	JUN 16 1995
CITY-ST-ZIP	LYNCHBURG VA 24502	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E034 (3/95)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gary E. Vaughan VP, Chief Financial Officer 804-582-1294
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0170032 FN