

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**May 04, 1999 8:00 am**  
**Secretary of State**

05-04-1999 90137 036 \*\*\*150.00

**DOCUMENT # 851304**

1. Corporation Name

**THERMO ELECTRON CORPORATION**



Principal Place of Business

81 WYMAN STREET  
P.O. BOX 9046  
WALTHAM MA 02254

Mailing Address

81 WYMAN STREET  
P.O. BOX 9046  
WALTHAM MA 02254

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1981

4. FEI Number

04-2209186

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

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME HATSPOULOS, JOHN N.

STREET ADDRESS 81 WYMAN STREET

CITY-ST-ZIP WALTHAM, MA 02254

TITLE T ☒ DELETE

NAME RIORDAN, MELISSA F

STREET ADDRESS 81 WYMAN STREET

CITY-ST-ZIP WALTHAM MA 02254

TITLE D ☐ DELETE

NAME GYFTOPOULOS, ELIAS P.

STREET ADDRESS 81 WYMAN STREET

CITY-ST-ZIP WALTHAM, MA 02254

TITLE V ☐ DELETE

NAME KELLEHER, PAUL F.

STREET ADDRESS 81 WYMAN STREET

CITY-ST-ZIP WALTHAM, MA 02254

TITLE AS ☐ DELETE

NAME AGHABABIAN, ROBERT V. (A

STREET ADDRESS 81 WYMAN STREET

CITY-ST-ZIP WALTHAM MA

TITLE V ☐ DELETE

NAME PANTAZELLOS, PETER G.

STREET ADDRESS 81 WYMAN STREET

CITY-ST-ZIP WALTHAM MA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Apicerno, Kenneth

2.3 STREET ADDRESS 81 Wyman Street

2.4 CITY-ST-ZIP Waltham, MA 02454

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

*Robert V. Aghababian*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert V. Aghababian

4-26-99

781.622.1132

Date

Daytime Phone #

CR2E034 (11/98)