FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
May 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **F93000001358 (1)**

1. Corporation Name
PELLON CORPORATION

Principal Place of Business	Mailing Address
20 INDUSTRIAL AVENUE **CHELMSFORD MA 01824**	**20 INDUSTRIAL AVENUE** **CHELMSFORD MA 01824-3610**

3. Date Incorporated or Qualified: **03/18/1993**
3a. Date of Last Report: **02/05/1996**

2. Principal Place of Business	2a. Mailing Address
21 3440 INDUSTRIAL DR.	26 3440 INDUSTRIAL DR
22 Suite, Apt. #, etc: ENO INDUSTRIAL PARK	27 Suite, Apt. #, etc: ENO INDUSTRIAL PARK
23 City & State: DURHAM, NC	28 City & State: DURHAM, NC
24 Zip: 27704 25 Country: USA	29 Zip: 27704 30 Country: USA

4. FEI Number: **04-2710458** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
C T CORPORATION SYSTEM **1200 SOUTH PINE ISLAND ROAD** **PLANATATION FL 33324**	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	PD	☐ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	CAMELIO, COSMO R		1.2 NAME	CAMELIO, COSMO R.	
STREET ADDRESS	20 INDUSTRIAL AVE.		1.3 STREET ADDRESS	3440 INDUSTRIAL DR	
CITY-ST-ZIP	CHELMSFORD MA		1.4 CITY-ST-ZIP	DURHAM, NC 27704	
TITLE	VST	☒ DELETE	2.1 TITLE	VST	☐ Change ☒ Addition
NAME	MOOSA, MOOSA E		2.2 NAME	DONOVAN, RANDAL	
STREET ADDRESS	20 INDUSTRIAL AVE.		2.3 STREET ADDRESS	3440 INDUSTRIAL DR.	
CITY-ST-ZIP	CHELMSFORD MA 01824		2.4 CITY-ST-ZIP	DURHAM, NC 27704	
TITLE	CD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	FREUDENBERG, REINHART DR		3.2 NAME		
STREET ADDRESS	POSTFACH 100363, D-6940 BERGSTR.		3.3 STREET ADDRESS		
CITY-ST-ZIP	WEINHEIM, GERMANY		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HASSELBRINK, WILLI		4.2 NAME		
STREET ADDRESS	POSTFACH 100363, D-6940 BERGSTR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	WEINHEIM, GERMANY		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	DAHLSTROEM, NORTHBERT		5.2 NAME		
STREET ADDRESS	POSTFACH 100363, D-6940 BERGSTR.		5.3 STREET ADDRESS		
CITY-ST-ZIP	WEINHEIM, GERMANY		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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.

SIGNATURE: Randal J. Donovan 5/6/97 919-620-3900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #