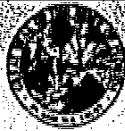


FILE NOW: FILING FEE AFTER MAY 11 IS \$220.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Candra B. McMath
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -7 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000004909 (8)

1. Corporation Name

MARIS EQUIPMENT COMPANY, INC.

Principal Place of Business

110 SUMMITT DR.
EXTON PA 19341

Mailing Address

110 SUMMITT DR.
EXTON PA 19341

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
10/29/1993

3a. Date of Last Report
02/07/1994

4. FEI Number
23-2726852

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

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

25

29 Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. 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

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME MITCHELL, GEORGE E
STREET ADDRESS 110 SUMMIT DR.
CITY- ST- ZIP EXTON PA

1.1 TITLE P/C Change Addition
1.2 NAME Mitchell, George E
1.3 STREET ADDRESS 110 Summit Dr.
1.4 CITY- ST- ZIP Exton PA

TITLE TD
NAME FRANKS, FREDERICK B III
STREET ADDRESS 110 SUMMITT DR.
CITY- ST- ZIP EXTON PA

2.1 TITLE T/S/V/D Change Addition
2.2 NAME Franks, Frederick B III
2.3 STREET ADDRESS 110 Summit Dr
2.4 CITY- ST- ZIP Exton PA

TITLE P
NAME MARINICK, ROBERT D
STREET ADDRESS 110 SUMMIT DR
CITY- ST- ZIP EXTON PA

3.1 TITLE V Change Addition
3.2 NAME Donnelly, Philip
3.3 STREET ADDRESS 110 Summit Dr
3.4 CITY- ST- ZIP Exton PA

TITLE S
NAME SIVERTSEN, KAREN L
STREET ADDRESS 110 SUMMIT DR
CITY- ST- ZIP EXTON PA

4.1 TITLE V Change Addition
4.2 NAME Banks, Barry
4.3 STREET ADDRESS 110 Summit Dr
4.4 CITY- ST- ZIP Exton PA

TITLE D
NAME PARTRIDGE, ARTHUR M III
STREET ADDRESS 110 SUMMIT DR
CITY- ST- ZIP EXTON PA

5.1 TITLE D Change Addition
5.2 NAME DELETE
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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

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 110.07(3)(b), 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:

Paul B. Francis III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
FRANCIS B. FRANCIS, III

V.P. FINANCIAL

2/28/95

110-524-7220