

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

FILED
Feb 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F93000005919 (6)**

1. Corporation Name
A P MERITOR, INC.

Principal Place of Business C/O LEGAL AFFAIRS, MELLON BANK CENTER 1735 MARKET STREET, 8TH FLOOR PHILADELPHIA PA 19103	Mailing Address C/O LEGAL AFFAIRS, MELLON BANK CENTER 1735 MARKET STREET, 8TH FLOOR PHILADELPHIA PA 19103
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/29/1993	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 41-1559212		Applied For <input type="checkbox"/> Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip	28 Country	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
24	25	29	30		

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH 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	85 Zip Code FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1998	
TITLE	PCD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	DCP <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOLL, RICHARD L	1.2 NAME	Sherman L. White
STREET ADDRESS	500 GRANT STREET, 4850 ONE MELLON BNK CNTR	1.3 STREET ADDRESS	1535 One Mellon Bank Ctr.
CITY-ST-ZIP	PITTSBURG PA	1.4 CITY-ST-ZIP	Pittsburgh, PA 15258-0001
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCARTOR, MICHAEL M	2.2 NAME	1535 One Mellon Bank Ctr.
STREET ADDRESS	500 GRANT STREET, 4850 ONE MELLON BNK CNTR	2.3 STREET ADDRESS	Pittsburgh, PA 15258-0001
CITY-ST-ZIP	PITTSBURG PA	2.4 CITY-ST-ZIP	
TITLE	AT <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANSINGER, MARK P.	3.2 NAME	772 One Mellon Bank Ctr.
STREET ADDRESS	500 GRANT STREET, 722 ONE MELLON BANK	3.3 STREET ADDRESS	Pittsburgh, PA 15258-0001
CITY-ST-ZIP	PITTSBURG PA	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANDSTATTER, JOHN F	4.2 NAME	1535 One Mellon Bank Ctr.
STREET ADDRESS	500 GRANT STREET, 4850 ONE MELLON BNK CNTR	4.3 STREET ADDRESS	Pittsburgh, PA 15258-0001
CITY-ST-ZIP	PITTSBURG PA	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOZEKA, JOHN C	5.2 NAME	1535 One Mellon Bank Ctr.
STREET ADDRESS	500 GRANT STREET, 4850 ONE MELLON BNK CNTR	5.3 STREET ADDRESS	Pittsburgh, PA 15258-0001
CITY-ST-ZIP	PITTSBURG PA	5.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOYCE, DENNIS M	6.2 NAME	1535 One Mellon Bank Ctr.
STREET ADDRESS	500 GRANT STREET, 4850 ONE MELLON BNK CNTR	6.3 STREET ADDRESS	Pittsburgh, PA 15258-0001
CITY-ST-ZIP	PITTSBURG PA	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.

CR2E034 (10/97)