FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

F9400000346 (6) **DOCUMENT #** 1. Corporation Name

GOULD ELECTRONICS INC.

Mailing Address

35129 CURTIS BLVD. EASTLAKE OH 44095-4401

Principal Place of Business

35129 CURTIS BLVD. **EASTLAKE OH 44095-4401**



	,					3. Date Incorporated or Qualified 3a. Date of Last Report 01/24/1994 05/01/1995
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For
21 26						13-3483110 Not Applicable
Suite. Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired Series Required \$8.75 Additional Fee Required
City & St 23]	tate	City & State	¬ '			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Ζφ 24	Country 25	Z _i p 29	30 Cou	Country 30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent
				81	Name	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				82	Street A	Address (P.O. Box Number is Not Acceptable)
			Ì	83		
				84	City	FL 85 Zip Code
or regis	stered agent, or both, in the State of Flor with, and accept the obligations of, Sec	ida. Such change was authorize	ed by the c	l ve-n xorpx	amed co oration's	prporation submits this statement for the purpose of changing its registered office board of directors. I hereby accept the appointment as registered agent. I am
	Signature, typed or printed name of registered ager			Ageni	signature re	equired white reinstating" DATE
12.	OFFICERS AN	ND DIRECTORS	13.		r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITEF	FERGUSON, C D	☐ DELETE	1	1, 1 TITLE 1,2 NAME		☐ Change ☐ Addition
NAME	ACTION ALIBRIA BLUE		1			
STREET ADDRES	EASTLAKE OH 44095		1	1.3 STREET ADDRESS		
CHTY-ST-ZIP TITLE	DV	DELETE		1.4 CITY - ST - ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME	KASAHARA, MASUO	TA) percut		2.2 NAME		Onling, Addition
STREET ADDRES	45 4 TODANOMON A CHOMPANINO MUODO CO			2.3 STREET ADDRESS 2.4 City - S1 - ZiP		
GITY-ST-ZIP						
TITLE	DCOB	Γ] D€LETE		3 1 THILE		Change Addition
NAME	KASAHARA, YUKIO		3 2 NA			
STREET ADDRES					ADDRESS	
CITY-S!-7IP	TOKYO		3 4 CI			
TIFLE	CFOV	☐ DELETE	4. 1 JI			Change
NAME	SHIMIZU, YASUYUKI		4 2 NA	ME		KANARI , YOSH IAKA
STREET ADDRES			4.3 S?	REET.	ADDRESS	······································
CITY - ST - ZIP	EASTLAKE OH 44095		4.4 CI	TY-S1	r- 21P	
TIPLE	VGCS	☐ DELETE	5 1 Ti	ILE		Change Addition
NAME	VEYSEY, MICHAEL C		5.2 NA	ME		
STREET ADDRES			5.3 S ^r	REET.	ADDRESS	
CITY-ST-ZIP	EASTLAKE OH 44095		5.4 CI	TY-SI	r-ZiP	
TITLE	D	DEFETE	6. 1 Ti	7LE	ĺ	Change Addition
NAME	WAY, ALVA O		6.2 NA	ME		
STREET ADDRES			63ST	REET.	ADDRESS	
C/TY-ST-Z/P	NEW YORK NY 10004		5 4 C)			lify for the exemption stated in Section 119 07/3/kl. Florida Statutes I further

Too nereby centry that the information supplied with this liling is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. 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 or Block 14 or Block 1

SIGNATURE:

4/24/96

(216) 953-5000

Daytin∖e Pholie #