

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

**FILED**  
**Apr 17 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F94000000672 (5)**  
 1. Corporation Name  
**GRIFFIN TECHNOLOGY INCORPORATED**



Principal Place of Business <b>1133 CORPORATE DR FARMINGTON NY 14425</b>	Mailing Address <b>1133 CORPORATE DR FARMINGTON NY 14425</b>
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DO NOT WRITE IN THIS SPACE

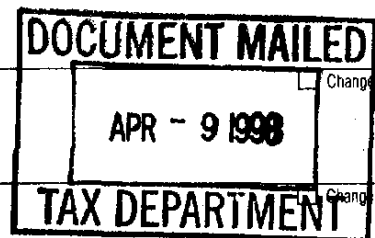
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>02/10/1994</b>	
21	22	26	27	4. FEI Number <b>16-0864416</b>	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
23	24	28	29	8. 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	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>THE PRENTICE-HALL CORPORATION SYSTEM, INC.</b> <b>1201 HAYS ST</b> <b>SUITE 105</b> <b>TALLAHASSEE FL 32301</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	<b>FL</b>	85

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>VD</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MORRIS, GERALD F.</b>	1.2 NAME	
STREET ADDRESS	<b>6683 MILITIA HILL NW</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CANTON OH</b>	1.4 CITY-ST-ZIP	
TITLE	<b>CD</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SEARLE, GREGG A.</b>	2.2 NAME	
STREET ADDRESS	<b>2534 DEER HOLLOW DR</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>HUDSON OH</b>	2.4 CITY-ST-ZIP	
TITLE	<b>VS</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FRANCIS-VOGELSAANG, CHAREE</b>	3.2 NAME	
STREET ADDRESS	<b>7799 HEARTHSTONE AVE</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>N CANTON OH</b>	3.4 CITY-ST-ZIP	
TITLE	<b>VD</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WARREN, ROBERT J.</b>	4.2 NAME	
STREET ADDRESS	<b>1025 CHELMS FORD NW</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>N CANTON OH</b>	4.4 CITY-ST-ZIP	
TITLE	<b>VPAS</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DETINGER, WARREN WALTER</b>	5.2 NAME	
STREET ADDRESS	<b>5237 BIRKDALE, NW</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CANTON OH</b>	5.4 CITY-ST-ZIP	
TITLE	<b>P</b> <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>URLAND, ROBERT S</b>	6.2 NAME	<b>VP + Controller</b>
STREET ADDRESS	<b>207 WHISPERING HILLS</b>	6.3 STREET ADDRESS	<b>Robert L. Stockamp</b>
CITY-ST-ZIP	<b>VICTOR NY</b>	6.4 CITY-ST-ZIP	<b>148 Eastbury, NE</b>
			<b>N. Canton, OH 44720</b>



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 a new address.

SIGNATURE \_\_\_\_\_

CR2E034 (10/97)

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## **GRIFFIN TECHNOLOGY INCORPORATED**

### **OFFICERS**

**GREGG A. SEARLE**  
PRESIDENT AND CEO

2534 DEER HOLLOW DRIVE  
HUDSON, OHIO 44236

**GERALD F. MORRIS**  
VICE PRESIDENT

6683 MILITIA HILL, NW  
CANTON, OHIO 44718

**ROBERT J. WARREN**  
VICE PRESIDENT & TREASURER

1025 CHELMSFORD, NW  
N. CANTON, OH 44720

**ROBERT L. STOCKAMP**  
VICE PRESIDENT & CONTROLLER

148 EASTBURY, NE  
N. CANTON, OHIO 44720

**CHAREE FRANCIS-VOGELSANG**  
VICE PRESIDENT & SECRETARY

7799 HEARTHSTONE AVE, NW  
N. CANTON, OHIO 44720

**WARREN W. DETTINGER**  
VICE PRESIDENT & ASST SECRETARY

5237 BIRKDALE, NW  
CANTON, OHIO 44708

### **DIRECTORS**

**GERALD F. MORRIS**  
**GREGG A. SEARLE**  
**ROBERT J. WARREN**