

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F94000002029 (6)**
1. Corporation Name
WALLAC INC.



Principal Place of Business
**9238 GAITHER ROAD
GAITHERSBURG MD 20877**

Mailing Address
**9238 GAITHER ROAD
GAITHERSBURG MD 20877**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

3. Date Incorporated or Qualified

04/20/1994

3a. Date of Last Report

03/16/1995

4. FEI Number

52-1173956

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

10. Name and Address of New Registered Agent

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 607.1504, 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 of person who is registered agent of the corporation

(NOTE: Registered Agent Signature required for this statement)

(DATE)

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME
DP BUCKLEY, GERARD D
STREET ADDRESS
9238 GAITHER ROAD
CITY, ST., ZIP
GAITHERSBURG MD 20877

2. TITLE ☐ DELETE

NAME
D GROSS, MURRAY
STREET ADDRESS
45 WILLIAM ST.
CITY, ST., ZIP
WELLESLEY MA 02181

3. TITLE ☒ DELETE

NAME
S DONAHUE, JOHN S
STREET ADDRESS
45 WILLIAM ST.
CITY, ST., ZIP
WELLESLEY MA 02181

4. TITLE ☒ DELETE

NAME
T BROADBENT, PETER A
STREET ADDRESS
45 WILLIAM ST.
CITY, ST., ZIP
WELLESLEY MA 02181

5. TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST., ZIP

6. TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST., ZIP

NAME

STREET ADDRESS

CITY, ST., ZIP

NAME

STREET ADDRESS

CITY, ST., ZIP

NAME

STREET ADDRESS

CITY, ST., ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY, ST., ZIP

15 TITLE ☐ Change ☐ Addition

16 NAME

17 STREET ADDRESS

18 CITY, ST., ZIP

19 TITLE ☐ Change ☒ Addition

20 NAME

21 STREET ADDRESS

22 CITY, ST., ZIP

23 TITLE ☐ Change ☒ Addition

24 NAME

25 STREET ADDRESS

26 CITY, ST., ZIP

27 TITLE ☐ Change ☐ Addition

28 NAME

29 STREET ADDRESS

30 CITY, ST., ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY, ST., ZIP

35 TITLE ☐ Change ☐ Addition

36 NAME

37 STREET ADDRESS

38 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 119.07(3)(k), Florida Statutes. I further certify that the information included 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 a 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; and that I am not a minor or an incompetent.

SIGNATURE:

Gerard D Buckley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 2, 1996 (301) 963-3200

CR2E034 (12/95)