## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9400003947 (8)

ELECTROSPACE STSTEMS, INC.				 		
Principal Place	•	Mailing Address				
		P. O. BOX 831359 RICHARDSON TX 75083-1359	ı	DO NOT WRITE	E IN THIS SPACE	
		•		3. Date Incorporated or Qualified	3a. Date of Last Report	
				07/28/1994	04/11/1996	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26 501 S. Jupit	ter Rd.	75-1312790	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			Fee Required	
City & State	e	City & State Garland, TX	75042	6. Election Campaign Financing	\$5.00 May Be	
23 Zin	Country	<del>  101                                  </del>		Trust Fund Contribution	Added to Fees	
Zip 24	Country	Zip 29 75042	Country Dallas	8. This corporation owes or has pa		
24	9. Name and Address of Current		Darias	Personal Property Tax due June 10. Name and Address of New Re		
CT CORPORATION SYSTEM			<u> </u>			
1200 S. PINE ISLAND RD PLANTATION FL 33324			82 Street A	Address (P.O. Box Number is Not Acceptal	ble)	
FORMATION FE 33324			83			
			84 City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508. Florida Statutes	the above-named of	corporation submits this statement for the t		
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 Statutés.						
SIGNATURE	Signature, typed or printed name of registered agent	and tille it applicable. (NOTE:	Registered Agent signature i	required when reinstating)	DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
TITLE	C	DELETE	1.1 TITLE	C D	Change Addition	
NAME	WRIGHT, PAUL E	/ \	1.2 NAME	Terry W. Heil		
STREET ADDRESS	1725 JEFFERSON DAVIS HWY		1.3 STREET ADDRESS	501 S. Jupiter Rd.		
CITY-ST-ZIP	ARLINGTON VA 22202		1.4 CITY-ST-ZIP	Garland, TX 75042		
TITLE	D	DELETE	2.1 TITLE	V D	Change Addition	
NAME	STELLMAN, JOHN C	`	2.2 NAME	Michael C. Eberhardt	`	
STREET ADDRESS	1725 JEFFERSON DAVIS HWY		2.3 STREET ADDRESS	501 S. Jupiter Rd.		
CITY-ST-ZIP	ARLINGTON VA 22202		2. 4 CITY-ST-ZIP	Garland, TX 75042		
TITLE	PD	X) DECETE	3.1 TITLE	AS D	Change Addition	
NAME	MCANALLY, MICHAEL D		3.2 NAME	Robert E. Dryden	`	
STREET ADDRESS	1301 E. COLLINS BLVD		3.3 STREET ADDRESS	501 S. Jupiter Rd., G	arland, TX 75042	
CITY-ST-ZIP	RICHARDSON TX 75081		3.4. CITY-ST-ZIP			
TITLE	VT	DELETE	4.1 TITLE	AT	Change 🔲 Addition	
NAME	WILSON, C. EDWIN	,	4. 2 NAME	John W. Nicholson	,	
STREET ADDRESS	1301 E. COLLINS BLVD		4.3 STREET ADDRESS	501 S. Jupiter Rd.		
CITY-ST-ZIP	RICHARDSON TX 75081		4.4 CITY - ST - ZIP	Garland, TX 75042		
TITLE	\$	DELETE	5.1 TITLE	AS	Change	
NAME	FRAMPTON, JOHN C	• •	5.2 NAME	Steven M. Post	_	
STREET ADDRESS	1301 E. COLLINS BLVD		5.3 STREET ADDRESS	501 S. Jupiter Rd.		
CITY-ST-ZIP	RICHARDSON TX 75081	———— <del>—————————————————————————————————</del>	5.4 CITY-ST-ZIP	Garland, TX 75042		
TITLE	AT	DELETE	6.1 TITLE	<u>.</u>	Change Addition	
NAME	SHARP, JOHN T.	, 1	6.2 NAME			
STREET ADDRESS	1301 E. COLLINS BLVD.		6.3 STREET ADDRESS			
CITY-ST-ZIP	RICHARDSON TX		6.4 CITY-ST-2IP			

I do 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 suppliemental annual upon is true and accurate and that my signature shall have the same legal effect as if made under oath; that fam an officer or director of the corporation of the receiver or tracke empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if manded on an artifact mental tracking to the corporation of th

**FILED** 

Sep 03 1997 8:00am

Secretary of State