

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

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Jul 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F94000004990			
1. Corporation Name American Automation Inc			
Principal Place of Business 100 Cessna Blvd Daytona Beach Fl 32124-6969		Mailing Address 100 Cessna Blvd Daytona Beach, Fl 32124-6969	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
3. Date Incorporated or Qualified 09/27/94		3a. Date of Last Report 06/12/96	
4. FEI Number 31-0974518		Applied For Not Applicable	
5. Certificate of Status Desired \$8.75 Additional Fee Required		6. Election Campaign Financing \$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8.	
9. Name and Address of Current Registered Agent Hinkley, Patricia A. 100 Cessna Blvd Daytona Beach, Fl 32124		10. Name and Address of New Registered Agent 81 Name Hinkley, Thomas J. 82 Street Address (P.O. Box Number is Not Acceptable) 100 Cessna Blvd 83 84 City Daytona Beach 85 Zip Code FL 32124	
11. Pursuant to the provisions of Sections 607.0602 and 607.1608, 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. Each 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 607.0605, Florida Statutes. SIGNATURE <i>Thomas J. Hinkley - PRESIDENT</i> <i>THOMAS J. HINKLEY - PRESIDENT</i> 7/14/97 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE NAME Hinkley, Thomas J. STREET ADDRESS 2642 Spruce Creek Blvd CITY - ST - ZIP Daytona Beach, Fl 32124 DELETE <input checked="" type="checkbox"/> PRESIDENT TITLE NAME Hinkley, Patricia A. STREET ADDRESS 2642 Spruce Creek Blvd CITY - ST - ZIP Daytona Beach, Fl 32124 DELETE <input checked="" type="checkbox"/> VP-FINANCE TITLE NAME STREET ADDRESS CITY - ST - ZIP DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	
14. 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 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, changed, or on an attachment with an address. SIGNATURE: <i>Thomas J. Hinkley - PRESIDENT</i> 6/30/97 (904) 767-3350 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone *			

CR2034 (9/96)

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