PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600000415

1. Corporation Name

SYVA COMPANY

Principal Place of Business

Mailing Address

1717 DEERFIELD ROAD DEERFIELD IL 60015

3403 YERBA BUENA ROAD SAN JOSE CA 95135

FILED Jun 09, 1999 8:00 am Secretary of State

06-09-1999 90006 008 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

01/24/1996

2. Principal F	l Place of Business 2a. Mailing Address				4. FEI Number	Apr	olied For
21	26				04-2864840	Not	Applicable
Suite, Apt.	#, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A	
22		27			5. Certificate of otatos Desired	Fee Rec	quired
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Zip Country		8. This corporation owes the current year		_
24		29 3	30		Personal Property Tax.		□No
Name and Address of Current Registered Agent					10. Name and Address of New Registere	d Agent	
1200 SOUTH PINE ISLAND HOAD				Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				City		85 Zip C	ode
			84	,	F	L _	
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							
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: F	Registered Age	nt signature required			
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	Barnes, Steven W		1.2 NAME				
STREET ADDRESS	1717 DEERFIELD ROAD		1.3 STREE	TADDRESS			
CITY-ST-ZIP	DEERFIELD IL 60015		1.4 CITY-S	T-ZIP			
TITLE	VASD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	CONNAUGHTON, JOHN P		2.2 NAME	- 1			
STREET ADDRESS	ATAT DEEDGE D. DOAD		2.3 STREE	TADDRESS			[
CITY-ST-ZIP			2. 4 CITY-5	ST-ZIP			
TITLE	VPAS	☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				Ì
STREET ADDRESS			3.3 STREE	TADDRESS			}
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP	_		
TITLE	VPAS	☐ DELETE 4.1 TI				☐ Change	☐ Addition
NAME	CASPER, MARC N	· · ·					
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP	DEERFIELD IL 60015			T-ZIP	_		
TITLE	VP	☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME	REID-ANDERSON, JAMES		5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	DEERFIELD IL 60015		5.4 CITY-9	T-ZIP			
TITLE	VP	☐ DELETE	6.1 TITLE			Change	Addition
NAME	BOGHOSIAN, ROBERT A	AN ROBERT A 6.2					
STREET ADDRESS	l ai_ aaa		6.3 STREE	TADORESS			
	1717 DELINICED NOAD		6.4 CITY- 9	1			
CITY-ST-ZIP	DECULEUD IL DUOTO						

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 of an attachment with an address, with all other like empowered.

JOHN M. DUFFEY

SIGNATURE:

NICE PRESIDENT AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR