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FILED  
May 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F96000004511 (9)

1. Corporation Name

THOMAS & BETTS CORPORATION

Principal Place of Business

1555 LYNNFIELD RD  
MEMPHIS TN 38119

Mailing Address

1555 LYNNFIELD RD  
MEMPHIS TN 38119

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/03/1996

4. FEI Number

22-1326940

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

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30125 30

2a. Mailing Address

26 8155 T & B Blvd.

Suite, Apt. #, etc.

27 City & State  
28 Memphis, TN

29 Zip Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 607.1508, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME DCEO  
DUNNIGAN, T. KEVIN  
STREET ADDRESS 1555 LYNNFIELD RD  
CITY-ST-ZIP MEMPHIS TN 38119

TITLE ☐ DELETE

NAME PCOO  
MOORE, CLYDE R  
STREET ADDRESS 1555 LYNNFIELD RD  
CITY-ST-ZIP MEMPHIS TN 38119

TITLE ☐ DELETE

NAME VT  
JONES, FRED R  
STREET ADDRESS 1555 LYNNFIELD RD  
CITY-ST-ZIP MEMPHIS TN 38119

TITLE ☐ DELETE

NAME S  
WAY, JANICE H  
STREET ADDRESS 1555 LYNNFIELD RD  
CITY-ST-ZIP MEMPHIS TN 38119

TITLE ☐ DELETE

NAME D  
DREW, ERNEST H  
STREET ADDRESS 1555 LYNNFIELD RD  
CITY-ST-ZIP MEMPHIS TN 38119

TITLE ☐ DELETE

NAME D  
DUNNIGAN, T. KEVIN  
STREET ADDRESS 1555 LYNNFIELD RD  
CITY-ST-ZIP MEMPHIS TN 38119

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 an address.

SIGNATURE:

*[Signature]*

*[Signature]*

(901) 252-5000

CR2E034 (10/97)