


**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 28, 2003 8:00 am**  
**Secretary of State**

01-28-2003 90080 050 \*\*\*150.00

**DOCUMENT # F97000003474**

1. Entity Name  
**VIEWSONICS, INC.**



Principal Place of Business  
**3103 N. ANDREWS AVE  
POMPANO BEACH FL 33064**

Mailing Address  
**8000 W FLORISSANT AVE  
STA 3854  
SAINT LOUIS MO 63136**



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip

3. Mailing Address  
**8000 W. Florissant Ave.  
Sta. 2586  
St. Louis, MO  
63136**  
Country  
**USA**

4. FEI Number **36-4166387**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

I, the above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KERNES, ALAN M 6545 E ROGERS CIRCLE BOCA RATON FL 33487 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD BEVIS, HAROLD C 1751 LAKE COOK ROAD., STE 550. DEERFIELD IL 60015 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAT MOON, DAVID C 8000 W. FLORISSANT AVE SAINT LOUIS MO 63136 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LATINKICH, DOUGLAS 3103 N. ANDREWS AVE EXT POMPANO BEACH FL 33064 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMITH, HARLEY M 8000 W. FLORISSANT AVE SAINT LOUIS MO 63136 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT RABE, D J 8000 W. FLORISSANT AVE SAINT LOUIS MO 63136 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Kernes, Alan M. 3101 N. Andrews Ave. Pompano Beach, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD Bevis, Harold C. 3000 Lakeside Dr. Bannockburn, IL 60015 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: David C Moon, E.V.P. & Asst. Treasurer 1/17/03 314-553-2058  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)



*Attachment*  
*F 97000003474*  
*30023301*

**Ronald L. Bednar**  
Director  
Income Tax Compliance

8000 West Florissant Ave.  
P.O. Box 4100  
St. Louis, MO 63136-8506

T (314) 553 2058  
E ron.bednar@emrson.com

January 24, 2003

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Please find enclosed our 2003 Uniform Business Reports for the following companies:

Viewsonics, Inc.  
Emerson Electric Co.  
ClosetMaid Corporation  
NTI Services, Inc.  
Emerson Electronic Connector & Components Company

Also enclosed are our checks in the amount of \$150.00 each, payment in full of the filing fees due.

We trust you will find the enclosed in order.

Sincerely,

R.L. Bednar

RLB:slk

Enclosures