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Mar 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Moynihan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000004354 (3)**

1. Corporation Name

THERMO SEPARATION PRODUCTS INC.

Principal Place of Business

**355 RIVER OAKS PKWY
SAN JOSE CA 95134**

Mailing Address

**355 RIVER OAKS PKWY
SAN JOSE CA 95134**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/19/1997

4. FEI Number

77-0417951

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution ☐

**\$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.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 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 **PD** ☒ DELETE

NAME **CHAPMAN, RICHARD W.K.**
STREET ADDRESS **2215 GRAND AVE PKWY**
CITY-ST-ZIP **AUSTIN TX 78728-3812**

TITLE **D** ☒ DELETE

NAME **LEWIS, EARL R**
STREET ADDRESS **8 E FORGE PKWY**
CITY-ST-ZIP **FRANKLIN MA 02038**

TITLE **D** ☒ DELETE

NAME **SMITH, ARVIN H**
STREET ADDRESS **1851 CENTRAL DR, SUITE 314**
CITY-ST-ZIP **BEDFORD TX 76021**

TITLE **AS** ☒ DELETE

NAME **AGHABABIAN, ROBERT V**
STREET ADDRESS **81 WYMAN ST**
CITY-ST-ZIP **WALTHAM MA 02254-9046**

TITLE **V** ☒ DELETE

NAME **ALLREAD, TERRY T**
STREET ADDRESS **355 RIVER OAKS PKWY**
CITY-ST-ZIP **SAN JOSE CA 95134-1991**

TITLE **AT** ☒ DELETE

NAME **APICERNO, KENNETH J**
STREET ADDRESS **81 WYMAN ST**
CITY-ST-ZIP **WALTHAM MA 02254-9046**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☐ Change ☒ Addition

1.2 NAME **Ion Jardine**
1.3 STREET ADDRESS **355 River Oaks Pkwy**
1.4 CITY-ST-ZIP **San Jose CA 95134**

2.1 TITLE **C** ☒ Change ☐ Addition

2.2 NAME **Chapman, Richard W.K.**
2.3 STREET ADDRESS **2215 Grand Ave Pkwy**
2.4 CITY-ST-ZIP **Austin TX 78728-3812**

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.

CR2E034 (10/97)