

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2004 8:00 am
Secretary of State

08-03-2004 90004 027 ***550.00

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1. Entity Name
XETRON CORPORATION



Principal Place of Business
**460 W CRESCENTVILLE ROAD
CINCINNATI, OH 45246**

Mailing Address
**460 W CRESCENTVILLE ROAD
CINCINNATI, OH 45246**

47000466



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

c/o Northrop Grumman

Suite, Apt. #, etc.

1840 Century Park East

07-162004 Chg-P CR2E034 (10/03)

City & State

City & State

Los Angeles, CA

4. FEI Number

31-0812980

Applied For

Not Applicable

Zip

Country

Zip

90067

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WYATT, MICHAEL
2570 CORAL LANDING BLVD.
SUITE 300
PALM HARBOR, FL 34684**

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City

Plantation

FL

Zip Code
33324

8. 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.

PETER F. SOUZA
ASSISTANT SECRETARY

7/21/04

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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
**CD
JENNICHES, SUZANNE
1745 W. NURSERY RD.
LINTHICUM HEIGHTS, MD 21090** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
MCKINLEY, JOHN G
460 W CRESCENTVILLE ROAD
CINCINNATI, OH 45246** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SMITH, WYLIE
1745 W. NURSERY RD.
LINTHICUM HEIGHTS, MD 21090** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MARSHALL, FRANK
1745 W. NURSERY RD.
LINTHICUM HEIGHTS, MD 21090** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Newby, Patricia A.
460 W. Crescentville Rd.
Cincinnati, OH 45246** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: *Patricia A. Newby - President*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia A. Newby **7/26/04** **(513)881-3253**
Date Daytime Phone #