2006 FOR PROFIT CORPORATION

FILED Apr 03, 2006 08:00 AM Secretary of State ANNUAL REPORT **DOCUMENT # G36145** CONTROL MICRO SYSTEMS, INC. Principal Place of Business Mailing Address 4420 METRIC DRIVE 4420 METRIC DRIVE WINTER PARK, FL 32792 US WINTER PARK, FL 32792 US 03172006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FE) Number 59-2297477 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MILLER, TIMOTHY DO NOT WRITE 4420 METRIC DRIVE WINTER PARK, FL 32792 IN THIS SPACE 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 lamiliar with, and accept the obligations of registered agent. INOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution, Added to Fees 10. OFFICERS AND DIRECTORS TITLE DPST MILLER, TIMOTHY J. NAME 4420 METRIC DRIVE STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32792 DDF NAME U00000468022 STREET ADDRESS CITY-ST-ZIP 04/14/06 80019-007 150.00 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-20P TITLE

12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119. 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 ampowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone A