

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Feb 26 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H68629 (5)  
1. Corporation Name  
AUTONOMOUS TECHNOLOGIES CORPORATION

Principal Place of Business  
2800 DISCOVERY DRIVE  
ORLANDO FL 32826

Mailing Address  
2800 DISCOVERY DRIVE  
ORLANDO FL 32826



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/23/1985	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2554729	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent GRIMM, WILLIAM A 201 E. PINE ST., STE. 1200 255 SOUTH ORANGE AVENUE ORLANDO FL 32801				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CODE	1.1 TITLE	D
NAME	FREY, RUDOLPH WILLIA	1.2 NAME	KEATES, RICHARD H.
STREET ADDRESS	2207 MALLARD CIRCLE	1.3 STREET ADDRESS	6588 UPPER YORK ROAD
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP	SOLEBURY, PA 18963
TITLE	D	2.1 TITLE	D
NAME	DOWNES, G. RICHARD	2.2 NAME	McFARLIN, WHITNEY
STREET ADDRESS	1220 HARDMAN DR.	2.3 STREET ADDRESS	3650 ANNAPOLIS LANE
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	MINNEAPOLIS, MN 55447
TITLE	D	3.1 TITLE	DV
NAME	HEBERT, G ARTHUR	3.2 NAME	CAPOZZA, RICHARD C.
STREET ADDRESS	1061 MAITLAND CENTER COMMONS 209	3.3 STREET ADDRESS	110 CHERRY CREEK CIRCLE
CITY-ST-ZIP	MAITLAND FL 32751	3.4 CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	D	4.1 TITLE	VT
NAME	RUFFETT, STANLEY	4.2 NAME	ALLEN, MONTY K.
STREET ADDRESS	1471 MAGELLAN CR.	4.3 STREET ADDRESS	2050 GOLDWATER COURT
CITY-ST-ZIP	ORLANDO FL 32818	4.4 CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	D	5.1 TITLE	V
NAME	BARABE, TIMOTHY	5.2 NAME	PETTIT, GEORGE H.
STREET ADDRESS	1520 MONTCLAIR WAY	5.3 STREET ADDRESS	70 OAKLEIGH LANE
CITY-ST-ZIP	DULUTH GA	5.4 CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	VP	6.1 TITLE	V
NAME	VALDES, JUAN	6.2 NAME	MARTIN, DONALD I.
STREET ADDRESS	6067 BURGUNDY AVE.	6.3 STREET ADDRESS	1725 SENECA BLVD.
CITY-ST-ZIP	ALTA LOMA CA	6.4 CITY-ST-ZIP	WINTER SPRINGS, FL 32708

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: Monty K. Allen

1-26-98

407-394-1609

CR2E034 (10/97)

**13. ATTACHMENT FOR ADDITIONS/CHANGES TO OFFICERS AND  
DIRECTORS IN 12**

1.1 Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
1.2 Name	WALTS, TERENCE A.		
1.3 Street Address	1315 CHARLESTON PLACE		
1.4 City-St-Zip	DUNWOODY, GA 30338		

1.1 Title	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
1.2 Name	RUFFETT, STANLEY		
1.3 Street Address	1471 MAGELLAN CR.		
1.4 City-St-Zip	ORLANDO, FL 32812		