

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

FILED

Apr 22 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # J47214

1. Corporation Name

Endicott Electronics, Inc.

Principal Place of Business

Mailing Address

4450 H Enterprise Court  
Melbourne, FL 32934

Same

3. Date Incorporated or Qualified

12/11/86

3a. Date of Last Report

3/19/96

4. FEI Number

59-2753956

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒

Yes

☐

No

2. Principal Place of Business

21 4450 Enterprise Court

2a. Mailing Address

26 4450 Enterprise Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

H

27

H

City & State

City & State

23 Melbourne FL

28 Melbourne FL

Zip

Country

Zip

Country

24 32934

25 USA

29 32934

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

James B. Edwards  
670 Waterwood Way  
Melbourne, FL 32940

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

(Type in full, typed name of registered agent and title if applicable)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	10 James B. Edwards 670 Waterwood Way Melbourne FL 32940	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	15 Margaret J. Edwards 670 Waterwood Way Melbourne, FL 32940	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 located 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.

MARGARET J. EDWARDS

SIGNATURE: Margaret J. Edwards

(Type in full, typed name of signing officer or director)

4/17/97

Date

407-242-2048

Daytime Phone #

CR2E034 (9/96)