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Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M95456 (3)

1. Corporation Name  
INTERFACE AND CONTROL SYSTEMS, INC.

Principal Place of Business

Mailing Address

1942 S. DAIRY RD.  
430 RIVERVIEW LANE  
W. MELBOURNE FL 32904  
US

1942 S. DAIRY RD.  
430 RIVERVIEW LANE  
W. MELBOURNE FL 32951-2725  
US



2. Principal Place of Business  
21 1942 S. Dairy Rd.  
Suite, Apt. #, etc.  
22 City & State  
23 W. Melbourne, FL.  
Zip Country  
24 32904 25 USA  
26 1942 S. Dairy Rd.  
Suite, Apt. #, etc.  
27 City & State  
28 W. Melbourne, FL  
Zip Country  
29 32904 30 USA

3. Date Incorporated or Qualified  
08/23/1988  
3a. Date of Last Report  
04/15/1996  
4. FEI Number  
59-2906895  
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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GAASBECK, JAMES VAN  
430 RIVERVIEW LANE  
MELBOURNE BCH FL 32951

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME GAASBECK, JAMES VAN  
STREET ADDRESS 430 RIVERVIEW LANE  
CITY-ST-ZIP MELBOURNE FL 32951  
TITLE D ☐ DELETE  
NAME BUCKLEY, BRIAN A.  
STREET ADDRESS 2110 S. RIVER RD.  
CITY-ST-ZIP MELBOURNE BCH FL 32951  
TITLE D ☐ DELETE  
NAME CAPPELAERE, PATRICE  
STREET ADDRESS 8303 WINTER WIND CT  
CITY-ST-ZIP ELLICOTT CITY, MD 21043  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
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 do 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:

Signature and typed or printed name of signing officer or director

JAMES Van Gaasbeck

2/28/97 407/723-0399

Date

Daytime Phone #

0105406

CR2E034 (9/96)