

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P03960 (2)

1. Corporation Name

VFL TECHNOLOGY CORPORATION



Principal Place of Business

42 LLOYD AVENUE
MALVERN PA 19355

Mailing Address

42 LLOYD AVENUE
MALVERN PA 19355

2. Principal Place of Business

2a. Mailing Address

21 16 HAGERTY BLVD.
Suite, Apt. #, etc.

26 16 HAGERTY BLVD.
Suite, Apt. #, etc.

22 City & State

27 City & State

23 WEST CHESTER, PA
Zip Country

28 WEST CHESTER PA
Zip Country

24 19382

25

29 19382

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/06/1984

3a. Date of Last Report

04/05/1995

4. FEI Number

23-2191984

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

10. Name and Address of New Registered Agent

ORI, ROBERT
825 8TH STREET
VERO BEACH FL 32961-0877

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 types or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

FILE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	DELETE
	PD				<input type="checkbox"/>
	PATTON, RICHARD W.	42 LLOYD AVENUE	MALVERN PA		
	VDS				<input type="checkbox"/>
	RUGGIANO, LOUIS M.	42 LLOYD AVENUE	MALVERN PA		
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

FILE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	DELETE	Change	Addition
1	PATTON RICHARD W.	16 HAGERTY BLVD.	WEST CHESTER PA 19382			<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	RUGGIANO, LOUIS M.	16 HAGERTY BLVD	WEST CHESTER PA 19382			<input checked="" type="checkbox"/>	<input type="checkbox"/>
3						<input type="checkbox"/>	<input type="checkbox"/>
4						<input type="checkbox"/>	<input type="checkbox"/>
5						<input type="checkbox"/>	<input type="checkbox"/>
6						<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

2/12/96

660-918-1100
Daytime Phone

CR2E034 (12/95)