

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # P05068 (2)

1. Corporation Name

GENERAL COMPUTER CORPORATION OF OHIO

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **02/20/1985** 3a. Date of Last Report **04/27/1994**

4. FEI Number **34-1057848** 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

2. Principal Place of Business 2a. Mailing Address

**2045 MIDWAY DR.
TWINSBURG OH 44087**

**2045 MIDWAY DR.
TWINSBURG OH 44087**

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip 28. Zip

24. Country 29. Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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 the corporation

Signature typed or printed name of registered agent and the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	PILARCZYK, RICHARD R.
STREET ADDRESS	2045 MIDWAY DRIVE
CITY, ST, ZIP	TWINSBURG OH
TITLE	VP
NAME	STITT, DAVID R.
STREET ADDRESS	7446 HUDSON PARK DRIVE
CITY, ST, ZIP	HUDSON OH
TITLE	D
NAME	TABOL, EDWARD
STREET ADDRESS	1800 S OCEAN BLV #1110
CITY, ST, ZIP	POMPANO BEACH FL
TITLE	D
NAME	DWORKIN, SIDNEY
STREET ADDRESS	7300 VALLEY VIEW
CITY, ST, ZIP	HUDSON OH
TITLE	D
NAME	BURRY, JOHN
STREET ADDRESS	31076 E. LANDERWOOD DR.
CITY, ST, ZIP	PEPPER PIKE OH
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT - DIRECTOR	☒ Change ☐ Addition
1.2 NAME	CAROL A. DRAGAN	
1.3 STREET ADDRESS	2045 MIDWAY DRIVE	
1.4 CITY, ST, ZIP	TWINSBURG OH 44087	
2.1 TITLE	EXE V.P. SECY. & TREASURER	☒ Change ☐ Addition
2.2 NAME	THOMAS R. STANLEY	
2.3 STREET ADDRESS	2045 MIDWAY DRIVE	
2.4 CITY, ST, ZIP	TWINSBURG OH 44087	
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	DIRECTOR	☒ Change ☐ Addition
5.2 NAME	ROBERT J. BOLGER	
5.3 STREET ADDRESS	7705 MAID MARION COURT	
5.4 CITY, ST, ZIP	ALEXANDRIA, VA. 22306	
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 is voluntarily furnished and does not qualify for the exemptions stated in Sections 119.07(1)(a), Florida Statutes. Further, I 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 or both, as changed, or on an attachment to this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CAROL A. DRAGAN

PRESIDENT

3/1/95 (2.6) 425-3241