FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 PM 1:40

DOCUMENT # P06060 (8)

1. Corporation Name
TRANSISTOR DEVICES, INC.

Principal Place of Business
65 HORSEHILL ROAD
CEDAR KNOLLS NJ 07927

Mailing Address
65 HORSEHILL ROAD
CEDAR KNOLLS NJ 07927

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/16/1985
3a. Date of Last Report: 01/26/1994

2. Principal Place of Business 21 | 2a. Mailing Address 26
Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27
City & State 23 | City & State 28
Zip 24 | Country 25 | Zip 29 | Country 30

4. FEI Number: 22-1515239 ☐ 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
FISH, BRIAN
1310 ROSEWOOD WAY
NICEVILLE FL 32578

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	BLAKE, RICHARD F.
STREET ADDRESS	137 MCGREGOR AVENUE
CITY-ST-ZIP	MT. ARLINGTON NJ
TITLE	D
NAME	DUFF, GEORGE M. JR.
STREET ADDRESS	271 COLLEGE ROAD
CITY-ST-ZIP	RIVERDALEONHUDSON NY
TITLE	D
NAME	KERNS, WILLIAM, JR
STREET ADDRESS	VILLAGE ROAD
CITY-ST-ZIP	NEW VERNON NJ
TITLE	T
NAME	VIOLETTE, JAMES M
STREET ADDRESS	31 CREST DRIVE
CITY-ST-ZIP	BASKING RIDGE NJ
TITLE	P
NAME	FISK, DAVID C.
STREET ADDRESS	47 MAGNOLIA AVE.
CITY-ST-ZIP	SHALIMAR FL
TITLE	D
NAME	CLARK, JAMES B.
STREET ADDRESS	57 PORTLAND RD.
CITY-ST-ZIP	SUMMIT NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
(1–6) TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition

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)(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: JAMES M VIOLETTE, TREASURER 01/09/95 201-267-1900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

0306356 FP