

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

**FILED**

**Jan 16 1997 8:00am  
Secretary of State**



**PROFIT CORPORATION ANNUAL REPORT 1997**

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

**DOCUMENT # P09109 (0)**  
1. Corporation Name  
**AUSTIN INTERNATIONAL, INC.**



Principal Place of Business: **25800 SCIENCE PARK DR. CLEVELAND OH 44122**  
Mailing Address: **25800 SCIENCE PARK DR. CLEVELAND OH 44122-7311**

3. Date Incorporated or Qualified: **02/17/1986**  
3a. Date of Last Report: **02/27/1996**

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30

4. FEI Number: **34-1476957**  
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  
**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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	GLEASON, MICHAEL A.	
STREET ADDRESS	25800 SCIENCE PARK	
CITY - ST - ZIP	CLEVELAND OH	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	BOLDT, JAMES C	
STREET ADDRESS	25800 SCIENCE PARK	
CITY - ST - ZIP	CLEVELAND OH	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	ROJ, WILLIAM H.	
STREET ADDRESS	1700 HUNTINGTON BLDG.	
CITY - ST - ZIP	CLEVELAND OH	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DAVIS, W. JACK	
STREET ADDRESS	P.O. BOX 950 N/A	
CITY - ST - ZIP	COEBURN VA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GLEASON, DAVID	
STREET ADDRESS	25800 SCIENCE PARK	
CITY - ST - ZIP	CLEVELAND OH	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Vice President/Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Steven W. Livecchi	
3.3 STREET ADDRESS	25800 Science Park Drive	
3.4 CITY - ST - ZIP	Beachwood, OH 44122	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Vice President/General Mgr.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Ted Eckles	
6.3 STREET ADDRESS	25800 Science Park Drive	
6.4 CITY - ST - ZIP	Beachwood, OH 44122	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.03(1)(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 C. Boldt* Treasurer 1-7-97 (216) 464-2400

CR2E034 (9/96)