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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # P13497

(3)

SMITHS INDUSTRIES AEROSPACE & DEFENSE SYSTEMS, I

Mailing Address

FILED Feb 13 1997 8:00am Secretary of State



435 DEVON PARK DR SUITE 101 WAYNE PA 19087		435 DEVON PARK DR., SUITE 101 WAYNE PA 19087-1937					
					3. Date Incorporated or Qualified 03/06/1987	3a. Date of La 05/01/19	st Report 96
2. Principal Place of Business 2a. Mailing A			ddress		4. FEI Number 38-2733944		Applied For
21 26 Suite, Apt #, etc.		26 Suite, Apt. #, etc.			00 21 00044	<u> </u>	Not Applicable 5 Additional
22 27		· · ·	¬		5. Certificate of Status Desired		B Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country 25	Zip Country 29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9. Name and Address of Curren	10. Name and Address of New Re	gistered Agent				
	CORPORATION SYSTEM		8	1 Name			
1200 S. PINE ISLAND ROAD PLANTATION FL 33324					Address (P.O. Box Number is Not Acceptab	le)	
			8	3			
			8	4 City		FL 85	Zip Code
11 Purcuant t	to the provisions of Sections 607.050	2 and 607 1508 Florida State	ites the ahr	Me-bamer	corporation submits this statement for the o	urnose of changi	no its registered
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.							
	m tamillar with, and accept the obligi	ations of, Section 607,0505, F	TOTICA STATU	es.			
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NC	TE: Registered A	gent signatur	e required when reinstating)	DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD PODENT F	☐ DELETE	1.1 TITU			L Char	nge 🔲 Addition
NAME	EHR, ROBERT F. 4141 EASTERN AVE SE		1.2 NAM	E			
STREET ADDRESS	GRAND RAPIDS MI		1.3 STR	ET ADDRESS			
CITY-ST-ZIP	VD			- ST - ZIP	ļ	Char	nge Addition
TITLE	JORPIE, ALAN A.	☐ DELETE	2.1 TITL		PETER PAGE	Es Cildi	ilige 🔲 Augilion
NAME	358 HALL AVE		2.2 NAM		FEIRINGE		
STREET ADDRESS	WALLINGFORD CT		•	ET ADDRESS			
CITY-ST-ZIP TITLE	S	DELETE	3.1 TITL	·ST-ZIP		☐ Char	nge
NAME	SEYMOUR, PAUL		3.2 NAM				_
STREET ADDRESS	1225 JEFFERSON DAVIS HW	Y		ET ADORESS			
CITY-ST-ZIP	ARLINGTON VA			-ST-ZIP			
TITLE	D	DELETE	4.1 TITL			☐ Char	nge 🔲 Addition
NAME	DAVIS, BENNIE L		4. 2 NAM	1E			
STREET ADDRESS	8025 BIRNAM WOOD DR		4.3 STR	et address			
CITY-ST-ZIP	MCLEAN VA			- ST- ZIP			
TITLE	D Houser, William D	DELETE	5.1 TOL	_	DREETER BERGE J. DONEVAN	⊠ Char	nge 🔲 Addition
NAME	2430 FORT SCOTT DR		5.2 NAM		TOO THE TANK THEY		
STREET ADDRESS	ARLINGTON VA			ET ADDRESS	ARLINGTON, VA 223ES		
CITY-ST-ZIP TITLE	D	☐ DELETE	5.4 City 6.1 Titl	- S1 - ZIP	TIKES TOTAL, VII DESCRIPTION	Char	nge Addition
NAME	ALBRECHT,RONALD C.	[6.2 NAM			5/10/	
STREET ADDRESS	435 DEVON PK DR, STE 102			et address			
CITY - ST - ZIP	WAYNE PA			-ST-ZIP			
or k.			28				

14. Ido 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, 1.10 ATT Cam Hallang

2/7/97

612-864-0001