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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P13497

1. Corporation Name

SMITHS INDUSTRIES AEROSPACE & DEFENSE SYSTEMS, I NC.

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90052 035 ***150.00



Principal Place of Business		Mailing Address					
35 DEVON PARK DR., SUITE 101 435 DEVON PARK DR., SUITE VAYNE PA 19087 WAYNE PA 19087		101		•			
		WAYNE PA 19087			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					03/06/1987		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
1 101 L	indenwood Drive	26 /Ol Linden we Suite, Apt. #, etc.	od M	ive	38-2733944		Not Applicable
_		- L			5. Certificate of Status Desired	, -	75 Additional e Required
2 Suite	. 125	27 Syife 125 City & State			6. Election Campaign Financing		.00 May Be
-	A .	28 Malvery P	0 A		Trust Fund Contribution		ded to Fees
3 Mal	Country	Zip 7.14.1 (18.14, 7	Country		8. This corporation owes the current year Inter	ngible	
4 /935		29 /4355 30	0 US			ŬYes	□No_
<u>' / -3</u>	9. Name and Address of Current				10. Name and Address of New Registered A	gent	
			81	Name	•		
CT CORPORATION SYSTEM				82 Street Address (P.O. Box Number is Not Acceptable)			
	S. PINE ISLAND ROAD				<u> </u>		
PLAF	NTATION FL 33324		83		·		
			84	City	FL	85	Zip Code
					poration submits this statement for the purpose of clon's board of directors. I hereby accept the appoint	بليل	the selection of
SIGNATURE	Signature, typed or printed name of registered agent			signature require	od when reinstaling) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	Cha	
TITLE	PD	☐ DELETE	1.1 TITLE 1.2 NAME			M C	ingo 🗀 raditon
NAME	EHR, ROBERT F. 4141 EASTERN AVE SE		1.3 STREET	marce 3	290 Patterson Ave., S.E.		
STREET ADDRESS	GRAND RAPIDS MI		1.3 STREET	I	The rappets of the same		
CITY-ST-ZIP TITLE	VD	☐ DELETE	2.1 TITLE	ZIF		Cha	ange [] Addition
NAME	PAGE, PETER	_	2.2 NAME	,	· 		
STREET ADDRESS	358 HALL AVE		2.3 STREET	ADDRESS .			-
CITY-ST-ZIP	WALLINGFORD CT		2.4 CITY-ST	-ZIP			
TITLE	S	DELETE	3.1 TITLE	A	S	☐ Cha	ange Addition
NAME	SEYMOUR, PAUL	•	3 2 NAME	· C	Valter Orme		
STREET ADDRESS	1225 JEFFERSON DAVIS HWY		3.3 STREET	ADDRESS /	Ol Lindenwood Drive Malvery PA		
CITY-ST-ZIP	ARLINGTON VA		3.4. CITY-ST	-ZIP	Malvern PA	=-	- Chia inii
TITLE	D	DELETE	4,1 TITLE	A		Cha	ange Addition
NAME	DAVIS, BENNIE L		4.2 NAME	B	ches, Norman	~	
STREET ADDRESS	8025 BIRNAM WOOD DR		4.3 STREET	ADDRESS	aches, Norman 165Fiachley Ad. hilds HULLandon NWIL 805		
CITY-ST-ZIP	MCLEAN VA	□ pri ctr	4.4 CITY-ST	ZIP C	hilds Hill,Lordon IV W 11 8NS	Cha	ange Addition
TITLE	D DONOVAN OFORCE I	☐ DELETE	5.1 TITLE 5.2 NAME				ingo El Addition
NAME	DONOVAN, GEORGE J	,	5.3 STREET	ADORESS I			
STREET ADDRESS	1225 JEFFERSON DAVIS HGWY	ſ .	5.4 CITY-\$T-				
CITY-ST-ZIP	ARLINGTON VA	☐ DELETE	6.1 TITLE			Cha	ange Addition
NAME	ALBRECHT,RONALD C.		6.2 NAME			τ	-
AL-AAIL	ALURLUIII,RUITALU U.		•	سا			

14. I 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, with all other like empowered.

CITY-ST-ZIP

ED NAME OF SIGNING OFFICER OR DIRECTOR