

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

**FILED**  
**May 06 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 # P17395 (5)**  
 1. Corporation Name  
**THOMSON CONSUMER ELECTRONICS, INC.**



Principal Place of Business: **10330 N. MERIDIAN ST. INDIANAPOLIS IN 46290 US**  
 Mailing Address: **PO BOX 1976 MS INH 260 INDIANAPOLIS IN 46206-1976**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

3. Date Incorporated or Qualified: **12/28/1987**  
 3a. Date of Last Report: **05/01/1996**  
 4. FEI Number: **35-1724835**  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
 6. Election Campaign Financing:  \$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 (61-64) fields.

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	C/D	<input checked="" type="checkbox"/> DELETE
NAME	PRESTAT, ALAIN	
STREET ADDRESS	10330 N. MERIDIAN ST.	
CITY-ST-ZIP	INDIANAPOLIS IN	
TITLE	VP/D	<input type="checkbox"/> DELETE
NAME	CAMPBELL, ROBERT	
STREET ADDRESS	10330 N. MERIDIAN ST.	
CITY-ST-ZIP	INDIANAPOLIS IN	
TITLE	VP/D	<input type="checkbox"/> DELETE
NAME	DE LA TOUR, BAUDOIN	
STREET ADDRESS	10330 N. MERIDIAN ST.	
CITY-ST-ZIP	INDIANAPOLIS IN	
TITLE	VPSD	<input type="checkbox"/> DELETE
NAME	MARX, WILLIAM F.	
STREET ADDRESS	10330 N. MERIDIAN ST.	
CITY-ST-ZIP	INDIANAPOLIS IN	
TITLE	DOA	<input type="checkbox"/> DELETE
NAME	SCHEER, FRANK N.	
STREET ADDRESS	10330 N. MERIDIAN ST.	
CITY-ST-ZIP	INDIANAPOLIS IN	
TITLE	T	<input type="checkbox"/> DELETE
NAME	BORROWMAN, WAYNE B.	
STREET ADDRESS	10330 N. MERIDIAN ST.	
CITY-ST-ZIP	INDIANAPOLIS IN	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Breton, Thierry	
1.3 STREET ADDRESS	10330 N. Meridian	
1.4 CITY-ST-ZIP	Indianapolis, IN	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
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		<input type="checkbox"/> Change <input type="checkbox"/> 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 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: *Frank N Scheer* Frank N Scheer 4/28/97 317-587-3336

CR2E034 (9/96)