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Jun 18 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 # P17449

(0)

1. Corporation Name

GRIMES AEROSPACE COMPANY

Principal Place of Business

550 ROUTE 55
P.O. BOX 247
URBANA OH 43078
US

Mailing Address

550 ROUTE 55
P.O. BOX 247
URBANA OH 43078-0247
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

12/30/1987

3a. Date of Last Report

05/01/1996

4. FEI Number

13-3355707

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

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETE

NAME FORSTMAN, NICHOLAS C.

STREET ADDRESS 550 ROUTE 55

CITY-ST-ZIP URBANA OH

TITLE V ☐ DELETE

NAME HUTCHINS, WINSTON W.

STREET ADDRESS 550 ROUTE 55

CITY-ST-ZIP URBANA OH

TITLE CD ☐ DELETE

NAME DUBOSE, MIKE J

STREET ADDRESS 550 ROUTE 55, P.O. BOX 247

CITY-ST-ZIP URBANA OH

TITLE VS ☒ DELETE

NAME CHRISTOPHER J KEARNEY

STREET ADDRESS 550 ROUTE 55, P.O. BOX 247

CITY-ST-ZIP URBANA OH

TITLE V ☐ DELETE

NAME BARRY C KOHN

STREET ADDRESS 550 ROUTE 55, P.O. BOX 247

CITY-ST-ZIP URBANA OH

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE VS ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DANIEL W. COSTELLO
550 ROUTE 55, P.O. BOX 247
URBANA OH 43017

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.

CR2E034 (9/96)

Daniel D. Scopetti
550 Route 55
P.O. Box 247
Urbana, OH 43078

ASSISTANT TREASURER