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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # **P24361** (8)
1. Corporation Name
SYSTEMS RESEARCH LABORATORIES, INC.

Principal Place of Business Mailing Address
2800 INDIAN RIPPLE RD. DAYTON OH 45440-0696

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		05/16/1989	05/01/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		31-0602250	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LELAND, H.R.	12 NAME	John W. Pitts
STREET ADDRESS	198 BRIDLE PATH	13 STREET ADDRESS	2800 Indian Ripple Road
CITY - ST - ZIP	WILLIAMSVILLE NY	14 CITY - ST - ZIP	Dayton OH 45440
TITLE	AT	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAYSON, D. E	22 NAME	
STREET ADDRESS	2800 INDIAN RIPPLE RD	23 STREET ADDRESS	
CITY - ST - ZIP	DAYTON OH	24 CITY - ST - ZIP	
TITLE	T	31 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUGGIO, J.P	32 NAME	John A. Walter
STREET ADDRESS	8 TIMBERLAKE DR.	33 STREET ADDRESS	4455 Genesee
CITY - ST - ZIP	ORCHARD PARK NY	34 CITY - ST - ZIP	Buffalo NY 14225
TITLE	D	41 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, LOREN K.	42 NAME	David H. Langstaff
STREET ADDRESS	1082 COLES DR.	43 STREET ADDRESS	800 Connecticut Ave NW Suite 1111
CITY - ST - ZIP	COLUMBUS IN	44 CITY - ST - ZIP	Washington DC 20006
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 an attachment with an addressee.

SIGNATURE: *David E. Grayson* David E. Grayson-Assistant Treasurer 4/7/95
SIGNATURE AND TYPE FOR REGISTERED NAME OF SIGNING OFFICER OR DIRECTOR (573)426-6000