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CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 APR 27 AM 8:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P25893** **(9)**

1. Corporation Name

COMDISCO MEDICAL EQUIPMENT GROUP, INC.

Principal Place of Business	Mailing Address
6133 NORTH RIVER ROAD ROSEMONT IL 60018	6133 NORTH RIVER ROAD ROSEMONT IL 60018

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/01/1989	3a. Date of Last Report: 04/04/1994
2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30
4. FEI Number: 36-3640329	☐ 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	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	P	☒ Change ☐ Addition
NAME	PONTIKES, KENNETH N.	1.2 NAME	KENNETH A. HALVERSON	
STREET ADDRESS	6133 N. RIVER ROAD	1.3 STREET ADDRESS		
CITY-ST-ZIP	ROSEMONT IL	1.4 CITY-ST-ZIP		
TITLE	VD	2.1 TITLE		☐ Change ☐ Addition
NAME	PONTIKES, WILLIAM N.	2.2 NAME		
STREET ADDRESS	6133 N. RIVER ROAD	2.3 STREET ADDRESS		
CITY-ST-ZIP	ROSEMONT IL	2.4 CITY-ST-ZIP		
TITLE	DCFO	3.1 TITLE		☐ Change ☐ Addition
NAME	VOSICKY, JOHN J.	3.2 NAME		
STREET ADDRESS	6133 N. RIVER ROAD	3.3 STREET ADDRESS		
CITY-ST-ZIP	ROSEMONT IL	3.4 CITY-ST-ZIP		
TITLE	VP	4.1 TITLE		☐ Change ☐ Addition
NAME	ANDREINI, ALAN	4.2 NAME		
STREET ADDRESS	6133 N. RIVER ROAD	4.3 STREET ADDRESS		
CITY-ST-ZIP	ROSEMONT IL	4.4 CITY-ST-ZIP		
TITLE	T	5.1 TITLE	D	☒ Change ☐ Addition
NAME	SIEGEL, RAYMOND J	5.2 NAME	NICHOLAS K. PONTIKES	
STREET ADDRESS	6133 N. RIVER ROAD	5.3 STREET ADDRESS		
CITY-ST-ZIP	ROSEMONT IL	5.4 CITY-ST-ZIP		
TITLE	S	6.1 TITLE		☐ Change ☐ Addition
NAME	HEWES, PHILIP A.	6.2 NAME		
STREET ADDRESS	6133 N. RIVER ROAD	6.3 STREET ADDRESS		
CITY-ST-ZIP	ROSEMONT IL	6.4 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 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: John J. Vosicky 04/12/95 (708)698-3000
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #

JOHN J. VOSICKY, CFO & TREASURER

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COMDISCO MEDICAL EQUIPMENT GROUP,
List OF OFFICERS & DIRECTORS
1995

STATEMENT #
36-3640339

ADDRESS FOR ALL OFFICERS & DIRECTORS:
6133 N. River Road
Rosemont, IL 60018

ALL TERMS EXPIRE:
December 12, 1995

DIRECTORS:

Nicholas Pontikes
William N. Pontikes
John J. Vosicky

OFFICERS:	OFFICE:
Kenneth Halverson	President
John J. Vosicky	Chief Financial Officer & Treasurer
Lloyd Simoneaux	Senior Vice President
Alan J. Andreini	Vice President
William N. Pontikes	Vice President
Robert A. Plowman	Vice President
Larry J. Smiertelny	Vice President
W. Bradford Wheatley	Vice President
Jo Dargie	Assistant Vice President
Lyssa Kaye Paul	Assistant Vice President
Philip A. Hawas	Secretary
David J. Keenan	Controller
David S. Reynolds	Assistant Controller
Thomas M. Doerr	Assistant Secretary
Jeremiah M. Fitzgerald	Assistant Secretary
Richard R. Gerken	Assistant Secretary