


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

FILED
May 11, 1999 8:00 am
Secretary of State

05-11-1999 90035 001 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P30062

1. Corporation Name
UNITHERM DIVISION, INC.

Principal Place of Business 29982 IVY GLENN DRIVE LAGUNA NIGUEL CA 92677	Mailing Address 29982 IVY GLENN DRIVE LAGUNA NIGUEL CA 92677
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

3. Date Incorporated or Qualified 07/03/1990	
4. FEI Number 95-1947155	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> 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

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	C HAGAN, J. MICHAEL	1.2 NAME	
STREET ADDRESS	29982 IVY GLENN DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAGUNA NIGUEL CA	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VS HOUDSHELL, MONTY A.	2.2 NAME	
STREET ADDRESS	29982 IVY GLENN DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAGUNA NIGUEL CA	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D CHURM, PETER	3.2 NAME	
STREET ADDRESS	67 MONARCH BAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH LAGUNA CA	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D CHASE, COCHRANE	4.2 NAME	
STREET ADDRESS	2161 PAPAYA DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	LA HABRA HEIGHTS CA	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D RANCK, BRUCE E	5.2 NAME	
STREET ADDRESS	29982 IVY GLENN DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAGUNA NIGUEL CA	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D CVENGROS, WILLIAM D	6.2 NAME	
STREET ADDRESS	29982 IVY GLENN DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAGUNA NIGUEL CA 92677	6.4 CITY-ST-ZIP	

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.

SIGNATURE:  DATE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

(949) 831-5350

CR2E034 (11/98)

545033-90035-1
P30062

Additional Furon Officers and Directors

Donald D. Bradley
General Counsel and Secretary
29982 Ivy Glenn Drive
Laguna Niguel, CA 92677

David Mascarin
Controller
29982 Ivy Glenn Drive
Laguna Niguel, CA 92677

John V. May
Treasurer
29982 Ivy Glenn Drive
Laguna Niguel, CA 92677

Joeseph Grewe
Vice President
29982 Ivy Glenn Drive
Laguna Niguel, CA 92677

William C. Shepherd
Director
29982 Ivy Glenn Drive
Laguna Niguel, CA 92677

R. David Threshie
Director
29982 Ivy Glenn Drive
Laguna Niguel, CA 92677