FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 17 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # P35150 **(2)**

1. Corporation Name
PROTOCOL SYSTEMS, INC.

Principal Place of Business	Mailing Address
8500 SOUTHWEST CREEKSIDE PLACE BEAVERTON OR 97008-7107	8500 SOUTHWEST CREEKSIDE PLACE BEAVERTON OR 97008-7107

3. Date Incorporated or Qualified: 08/16/1991
3a. Date of Last Report: 05/01/1994

	2. Principal Place of Business		2a. Mailing Address
21		26	
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip: 97008-7107 / 25 Country	29	Zip: 97008-7107 / 30 Country

4. FEI Number: 93-0913130 ☐ 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

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 **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 reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	1.1 TITLE	☐ Change ☐ Addition
NAME	MOON, JAMES B.	1.2 NAME	
STREET ADDRESS	8500 S.W. CREEKSIDE PL.	1.3 STREET ADDRESS	See Attached List
CITY-ST-ZIP	BEAVERTON OR	1.4 CITY-ST-ZIP	
TITLE	VS	2.1 TITLE	☐ Change ☐ Addition
NAME	SWANSON, CRAIG M.	2.2 NAME	
STREET ADDRESS	8500 S.W. CREEKSIDE PL.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BEAVERTON OR	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	FEE, JAMES P JR	3.2 NAME	
STREET ADDRESS	8500 SW CREEKSIDE PL	3.3 STREET ADDRESS	
CITY-ST-ZIP	BEAVERTON OR	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	☐ Change ☐ Addition
NAME	HOLLSTEIN, CARL P JR	4.2 NAME	
STREET ADDRESS	8500 SW CREEKSIDE PL	4.3 STREET ADDRESS	
CITY-ST-ZIP	BEAVERTON OR	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	OYLER, ALLEN L	5.2 NAME	
STREET ADDRESS	8500 SW CREEKSIDE PL	5.3 STREET ADDRESS	
CITY-ST-ZIP	BEAVERTON OR	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	☐ Change ☐ Addition
NAME	TAYLOR, LEE A MD	6.2 NAME	
STREET ADDRESS	8500 SW CREEKSIDE PL	6.3 STREET ADDRESS	
CITY-ST-ZIP	BEAVERTON OR	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)(k), 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: Craig M Swanson V P - Finance 4/4/95 503-526-8500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0488189 FN

935750

Protocol Systems, Inc.
January 1, 1995- Officers and Directors

Officers:	***Title:***
James B. Moon 11280 S.W. Pintail Loop Beaverton, OR 97007	President, CEO, Chairman of the Board
Craig M. Swanson 17580 Tree Top Way Lake Oswego, OR 97034	V.P.-Finance, Secretary
James P. Fee, Jr. 13645 N.W. Lariat Ct. Portland, OR 97229	V.P.- Sales & Marketing
Carl Hollstein 10880 S.W. Avocet Ct. Beaverton, OR 97007-8391	V.P.-Manufacturing
Allen Oyler 12288 S.W. 131st Ave Tigard, OR 97223	V.P.-Human Res/Admin
Lee A. Taylor 7320 S.W. Gable Park Rd. Portland, OR 97225	V.P.-Research & Medical Affairs
James P. Welch 14340 S.W. Hazelhill Dr. Tigard, OR 97224	V.P.-Quality Systems

Directors:	***Date appointed:***
Alan S, Dishlip 2525 S.W. Timberline Dr. Portland, OR 97225	May, 1993
William New, Jr. 1501 Industrial Rd. San Carlos, CA 94070	May, 1994
Frank E. Samuel, Jr. 1820 Randolph St., N.W. Washington, D.C. 20011	May, 1994
Ronald S. Newbower Barlett Hall 3, 40 Blossom St. Boston, MA 02114	May, 1994
Keith R. Larson 14 Hillshire Dr. Lake Oswego, OR 97034	May, 1993