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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 24 PM 1:53

DOCUMENT # P36776 (3)

1. Corporation Name
DATALINE CORPORATION

Principal Place of Business
43 DANBURY RD
WILTON CT 06897

Mailing Address
43 DANBURY RD
WILTON CT 06897

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/18/1991
3a. Date of Last Report: 04/21/1994

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 84-1108242 — 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
THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST
SUITE 105
TALLAHASSEE FL 32301

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	DC	1.1 TITLE	DCP	☑ Change ☐ Addition
NAME	BELL, HUGH C.	1.2 NAME		
STREET ADDRESS	43 DANBURY RD	1.3 STREET ADDRESS		
CITY-ST-ZIP	WILTON CT	1.4 CITY-ST-ZIP		
TITLE	~~P~~	2.1 TITLE		☑ Change ☐ Addition
NAME	~~SIMMETH, WILLIAM J~~	2.2 NAME		
STREET ADDRESS	~~43 DANBURY RD.~~	2.3 STREET ADDRESS	N/A	
CITY-ST-ZIP	~~WILTON CT~~	2.4 CITY-ST-ZIP		
TITLE	VT	3.1 TITLE		☐ Change ☐ Addition
NAME	DETROY, THOMAS M	3.2 NAME		
STREET ADDRESS	43 DANBURY RD.	3.3 STREET ADDRESS		
CITY-ST-ZIP	WILTON CT	3.4 CITY-ST-ZIP		
TITLE	V	4.1 TITLE		☐ Change ☐ Addition
NAME	BAKER, WARREN	4.2 NAME		
STREET ADDRESS	43 DANBURY RD	4.3 STREET ADDRESS		
CITY-ST-ZIP	WILTON CT	4.4 CITY-ST-ZIP		
TITLE	V	5.1 TITLE		☐ Change ☐ Addition
NAME	KRAYESKI, KENNETH	5.2 NAME		
STREET ADDRESS	43 DANBURY RD	5.3 STREET ADDRESS		
CITY-ST-ZIP	WILTON CT	5.4 CITY-ST-ZIP		
TITLE	S	6.1 TITLE		☐ Change ☐ Addition
NAME	KANTNER, PERRY	6.2 NAME		
STREET ADDRESS	555 E WILLIAM ST	6.3 STREET ADDRESS		
CITY-ST-ZIP	ANN ARBOR MI	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: _____ 3/6/95 (203) 762-2473
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR — Date — Daytime Phone #
THOMAS M. DETROY · VP/TREASURER

000010 FP