

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra H. MacArthur
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P39458

(5)

1. Corporation Name

OEM/MILLER CORPORATION

Principal Place of Business

**1300 DANNER DRIVE
AURORA OH 44202**

Managing Officers

**1300 DANNER DRIVE
AURORA OH 44202**



2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH 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 607.02(2) and 607.15(8), Florida Statutes, the above named corporation furnishes 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 607.02(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	CFOT	☐ DELETE
NAME	MILLER, WILLIAM F.	
STREET ADDRESS	1300 DANNER DRIVE	
CITY, ST, ZIP	AURORA OH	
TITLE	PSDC	☐ DELETE
NAME	MILLER, WILLIAM F., III	
STREET ADDRESS	1300 DANNER DRIVE	
CITY, ST, ZIP	AURORA OH	
TITLE	V	☐ DELETE
NAME	BLUE, BILL	
STREET ADDRESS	1300 DANNER DRIVE	
CITY, ST, ZIP	AURORA OH	
TITLE	V	☐ DELETE
NAME	MEARNS, LARRY	
STREET ADDRESS	1300 DANNER DRIVE	
CITY, ST, ZIP	AURORA OH	
TITLE	AS	☐ DELETE
NAME	PRUNTY, NANCY	
STREET ADDRESS	1300 DANNER DRIVE	
CITY, ST, ZIP	AURORA OH	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this Report is entirely true and correct in all respects. For the exempted state (in Section 119.07(3)(a) Florida Statutes) I further certify that the information included on this Report is true and correct in all respects. I further certify that my signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation and that my name is authorized to be included in this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or as an attachment with an address.

SIGNATURE: *William F. Miller III* **WILLIAM F. MILLER III**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.28.96

216 562 2900

CR2E034 (12/95)