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Jan 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P39586 (3)

1. Corporation Name
WESTINGHOUSE KSC CO., INC.

Principal Place of Business

Mailing Address

C/O WESTINGHOUSE ELECTRIC CORPORATION
11 STANWIX STREET
PITTSBURGH PA 15222

C/O WESTINGHOUSE ELECTRIC CORPORATION
11 STANWIX STREET
PITTSBURGH PA 15222-1312

3. Date Incorporated or Qualified
07/10/1992

3a. Date of Last Report
07/15/1996

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

25

29

30

4. FEI Number

52-1796852

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 SOUTH PINE ISLAND RD.
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

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 PD
NAME MOFFITT, W. C.
STREET ADDRESS %1955 FREMONT AVENUE
CITY-ST-ZIP IDAHO FALLS ID

TITLE V
NAME BURLEY, T. B.
STREET ADDRESS %180 BETA DRIVE, O'HARA
CITY-ST-ZIP PITTSBURGH PA

TITLE S
NAME BACHY, D M
STREET ADDRESS %11 STANWIX STREET
CITY-ST-ZIP PITTSBURGH PA

TITLE T
NAME MISKA, R. F.
STREET ADDRESS %4350 NORTHERN PIKE
CITY-ST-ZIP MONROEVILLE PA

TITLE D
NAME PITTS, S. R.
STREET ADDRESS 11 STANWIX ST.
CITY-ST-ZIP PITTSBURGH PA 15222

TITLE D
NAME SPENCER, S.D.
STREET ADDRESS %875 GREENTREE ROAD
CITY-ST-ZIP PITTSBURGH PA

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: J. M. Bachy D. M. Bachy, Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/03/96 412-642-5260

Date

Daytime Phone #

0007280

CR2E034 (9/96)