

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

FILED
Apr 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P40239** (6)
1. Corporation Name
SIERRA INTERNATIONAL INC.

Principal Place of Business
**1 SIERRA PL
LITCHFIELD IL 62056
US**

Mailing Address
**1 SIERRA PL
LITCHFIELD IL 62056
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/27/1992	
21		26	100 Double Beach Rd.	4. FEI Number 36-2643586	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip		Zip			
24		29			
Country		Country			
25		30			

9. Name and Address of Current Registered Agent

10. Name and Address of New 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
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	P	1.1 TITLE	President
NAME	VENTER, PETER	1.2 NAME	John Bender
STREET ADDRESS	1 SIERRA PL	1.3 STREET ADDRESS	1 Sierra Place
CITY-ST-ZIP	LITCHFIELD IL	1.4 CITY-ST-ZIP	Litchfield, IL 62056
TITLE	VSD	2.1 TITLE	Sen. V.P., Sec. Director
NAME	LECKERLING, JON P.	2.2 NAME	
STREET ADDRESS	100 DOUBLE BEACH ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRANFORD CT	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	Sen. V.P. & CFO
NAME	ONORATO, JOSEPH A.	3.2 NAME	
STREET ADDRESS	100 DOUBLE BEACH ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRANFORD CT	3.4 CITY-ST-ZIP	
TITLE	C	4.1 TITLE	
NAME	GURLEY, RICHARD A	4.2 NAME	
STREET ADDRESS	1 SIERRA PLACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	LITCHFIELD IL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	V.P. & Asst. Secretary
NAME		5.2 NAME	Edward D. Toole
STREET ADDRESS		5.3 STREET ADDRESS	100 Double Beach Road
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Branford, CT 06405
TITLE		6.1 TITLE	Assistant Treasurer
NAME		6.2 NAME	Stephen D. Vivier
STREET ADDRESS		6.3 STREET ADDRESS	100 Double Beach Road
CITY-ST-ZIP		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.

SIGNATURE:

Stephen D. Vivier

4/2/98

(203)481-5751

CR2E034 (10/97)