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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000022892 (1)

SUSSEX SEMICONDUCTOR OF FLORIDA. INC.

Principal Place of Business Mailing Address 12251 TOWNE LAKE DRIVE 12251 TOWNE LAKE DRIVE FORT MYERS FL 33913-8012 FORT MYERS FL 33913 3a. Date of Last Report 3. Date Incorporated or Qualified 03/21/1994 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0496527 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TIBOL, GEORGE J 1220 ANTIGUA CT 82 Street Address (P.O. Box Number is Not Acceptable) MARCO ISLAND FL 83 84 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, typicd or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) OFFICERS AND DIRECTORS 13. 12. Addition Change DELETE 1.1 TITLE TITLE TIBOL, GEORGE 1.2 NAME R2E034 NAME 25011 GOLDCREST DRIVE 1.3 STREET ADDRESS STREET ADDRESS **BOUITA SPRINGS FL 33923** 1.4 CITY - ST - ZiP CITY - ST - ZIP DELETE Change Addition 2.1 TITLE THEF TIBOL, MARIA 2.2 NAME NAME 25011 GOLDCREST DRIVE 2.3 STREET ADDRESS STREET ADDRESS **BOUITA SPRINGS FL 33923** 2.4 CITY-ST-ZIP CHY-\$1-Z0 DELETE Change Addition 3.1 TITLE THE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST-ZIP CHY-S1 20 DELETE ☐ Change Addition 4.1 TITLE TITLE 4.2 NAME NAMe 43 STREET ADDRESS STREET ADDRESS 4.4 C-TY-ST-ZIP CITY - \$1 - ZiP DELETE Change Addition 5.1 TITLE TILLE 5.2 NAME HAME 5.3 STREET ADDRESS STREET ADDRESS

5.4 City-St-2IP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

DITY SI-7-2

CITY ST 703

HU

NAME STHEET ADDRESS

SIGNATURE AND TYP

DELETE

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.

FILED

May 01 1997 8:00am

Secretary of State

Change

Addition