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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$67277

(1)

PATCO ELECTRONICS, INC. Principal Piace of Business Mailing Address 1855 SHEPHERD DRIVE 1855 SHEPHERD DRIVE TITUSVILLE FL 32780-7820 TITUSVILLE FL 32780 3. Date Incorporated or Qualified 3a. Date of Last Report 07/15/1991 03/12/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3075317 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BOATMAN, ROGER M. 1855 SHEPHERD DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) TITUSVILLE FL 32780 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or profest name of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. (96/6)DELETE Change 1.1 TITLE TOLE BOATMAN, ROGER M. NAME 1.2 NAME 1855 SHEPHARD DR. 1.3 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 1.4 CITY-ST-ZIP CITY ST. 7IP DELETE Change Addition THILE 21 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Addition Change 3.1 TITLE 10118 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIF 3 4. CITY - ST-ZIP DELETE Change ■ Addition 4.1 TITLE THEF 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - S1 - Zit 4.4 CITY - ST - ZIP DELETE Change Addition HILE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CHY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition THILE 61 TITLE 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP C:TY - 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

SIGNATURE:

appears in Block 12 or Block 13

FILED

Mar 17 1997 8:00am

Secretary of State