

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 160269 (7)

1. Corporation Name
ELECTRO-SYSTEMS CORPORATION



Principal Place of Business: 4508 MAGNOLIA BEACH ROAD, P.O. BOX 27700, PANAMA CITY FL 32411-4700
Mailing Address: 4508 MAGNOLIA BEACH ROAD, P.O. BOX 27700, PANAMA CITY FL 32411-4700

3. Date Incorporated or Qualified: 01/20/1950
3a. Date of Last Report: 04/26/1995
4. FEI Number: 59-0626059
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: DUKATE-BISHOP, BRONWEN M., 4508 MAGNOLIA BEACH ROAD, PANAMA CITY BCH. FL 32407

10. Name and Address of New Registered Agent (81-85): Name: WILLIAM LAVERY, Street Address: 4508 MAGNOLIA BEACH RD, City: PANAMA CITY, FL, Zip Code: 32408

11. Pursuant to the provisions of Sections 607.0102 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 607.0605, Florida Statutes.
SIGNATURE: [Signature] President DATE: 4-26-96

12. OFFICERS AND DIRECTORS

TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	BISHOP, J. W	
STREET ADDRESS	113 MARLIN CIR.	
CITY - ST - ZIP	PANAMA CITY FL	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	GODWIN, MARK	
STREET ADDRESS	427 BUNKERS COVE RD.	
CITY - ST - ZIP	PANAMA CITY FL	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	DUKATE-BISHOP, MS. BRONWEN	
STREET ADDRESS	113 MARLIN CIR	
CITY - ST - ZIP	PANAMA CITY BCH. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	WILLIAM LAVERY	
1.3 STREET ADDRESS	618 Stevens Court	
1.4 CITY - ST - ZIP	Martinez Ga. 30907	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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PM 5/1/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [Signature] Signature and Typed or Printed Name of Signing Officer or Director: William H. Lavery Jr.

CR2E034 (12/95)