

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

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PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 455281 (6)**

1. Corporation Name  
**JOHNSON CONTROLS WORLD SERVICES INC.**



Principal Place of Business <b>PO BOX 591                  MILWAUKEE WI 53201                  US</b>	Mailing Address <b>PO BOX 591                  MILWAUKEE WI 53201                  US</b>
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<b>2. Principal Place of Business</b> 21 _____ Suite, Apt. #, etc. _____ 22 _____ City & State _____ 23 _____ Zip _____ Country _____ 24 _____ 25 _____	<b>2a. Mailing Address</b> 26 _____ Suite, Apt. #, etc. _____ 27 _____ City & State _____ 28 _____ Zip _____ Country _____ 29 _____ 30 _____	<b>3. Date Incorporated or Qualified</b> <b>06/25/1974</b>	<b>3a. Date of Last Report</b> <b>05/01/1995</b>	<b>4. FEI Number</b> <b>59-1575859</b>	Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes</b> <input type="checkbox"/> Yes <input type="checkbox"/> No					

<b>9. Name and Address of Current Registered Agent</b>  <b>CT CORPORATION SYSTEM                  1200 S. PINE ISLAND ROAD                  PLANTATION FL 33324</b>	<b>10. Name and Address of New Registered Agent</b> 81 Name _____ 82 Street Address (P.O. Box Number is Not Acceptable) _____ 83 _____ 84 City _____ <b>FL</b> 85 Zip Code _____
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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: \_\_\_\_\_ (NOTE: Registered Agent's signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCOD ROUNDY III, PAUL V. 7315 NORTH ATLANTIC AVE CAPE CANAVERAL FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	M CHRISTIAN, BARBARA A 5757 N GREEN BAY AVE MILWAUKEE WI	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VPD KEYES, JAMES H. 5757 N. GREEN BAY AVENUE MILWAUKEE WI	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	CCEO LEWIS, JOSEPH W. 507 E MICHIGAN ST MILWAUKEE WI	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	T ROELL, STEPHEN A. 5757 N. GREEN BAY AVE. MILWAUKEE WI	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	VPS ADAMS, WILLIAM D. 7315 NORTH ATLANTIC AVE CAPE CANAVERAL FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

*Schedule Attached*

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: *BA Huston* 4-8-96 (414) 228-1200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

12/05/1995

Directors and Officers  
Johnson Controls World Services Inc.

DIRECTORS:

John P Kennedy Director  
Primary : 5757 North Green Bay Avenue  
Address : P.O. Box 591  
Milwaukee, WI 53201-0591

James H Keyes Director  
Primary : 5757 North Green Bay Avenue  
Address : P.O. Box 0591  
Milwaukee, WI 53201-0591

Joseph W Lewis Director  
Primary : 507 East Michigan Street  
Address : Milwaukee, WI 53202

Robert C Dickhaus Director  
Primary : 41 Perimeter Center East  
Address : Suite 200  
Atlanta, GA 30346

Stephen A Roell Director  
Primary : 5757 North Green Bay Avenue  
Address : P.O. Box 591  
Milwaukee, WI 53201-0591

OFFICERS:

Joseph W Lewis Chairman & CEO  
Primary : 507 East Michigan Street  
Address : Milwaukee, WI 53202

William D Adams Vice President & Secretary  
Primary : 7315 North Atlantic Avenue  
Address : Cape Canaveral, FL 32920-3792

Stephen A Roell Treasurer  
Primary : 5757 North Green Bay Avenue  
Address : P.O. Box 591  
Milwaukee, WI 53201-0591

Sebastian James Calanni Vice President  
Primary : 2144 Loma Linda Drive  
Address : Los Alamos, NM 87544

James H Keyes Vice President  
Primary : 5757 North Green Bay Avenue  
Address : P.O. Box 0591  
Milwaukee, WI 53201-0591

John P Kennedy Assistant Secretary  
Primary : 5757 North Green Bay Avenue  
Address : P.O. Box 591  
Milwaukee, WI 53201-0591

Robert C Dickhaus President  
Primary : 41 Perimeter Center East  
Address : Suite 200  
Atlanta, GA 30346

Philip W Engle Assistant Secretary  
Primary : 41 Perimeter Center East  
Address : Suite 200  
Atlanta, GA 30346

Michael J Geisler Vice President  
Primary : 7315 N. Atlantic Ave.  
Address : Cape Canaveral, FL 32920-3792

John W Gray Assistant Secretary  
Primary : 7315 N. Atlantic Ave.  
Address : Cape Canaveral, FL 32920-3792

Richard Harville Vice President  
Primary : 41 Perimeter Center East  
Address : Suite 200  
Atlanta, GA 30346

R L Johnson Vice President  
Primary : 7315 N. Atlantic Ave.  
Address : Cape Canaveral, FL 32920-3792

Harold E Lockwood Vice President  
Primary : 7315 N. Atlantic Ave.  
Address : Cape Canaveral, FL 32920-3792

Jerome D Okarma Assistant Secretary  
Primary : 5757 North Green Bay Avenue  
Address : P.O. Box 591  
Milwaukee, WI 53201-0591

Vice President  
Primary : 5757 North Green Bay Avenue  
Address : P.O. Box 591  
Milwaukee, WI 53201-0591

M W Tindall Vice President  
Primary : 7315 N. Atlantic Ave.  
Address : Cape Canveral, FL 32920-3792

D T Tyler Vice President  
Primary : 7315 N. Atlantic Ave.  
Address : Cape Canaveral, FL 32920-3792