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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1, Corporation Name WESTCON, INC. F97000003758 (6)

## FILED Jan 29 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address   |  |  |                            |             |                                      | - 1 FANDING DEFE COEFF FONDS AND DEFE NAMED NO.   | #10 <b>%</b>               | BREEF JEJE 1881       |
|---|--|--|----------------------------|-------------|--------------------------------------|---|----------------------------|-----------------------|
| 1021 S. 23RE<br>BISMARCK N  |  | 1021 S. 23RD STREET<br>BISMARCK ND 58502                     |                            |             |                                      |   |                            |                       |
| STORMATOR TO GOOD   |  |  |                            |             |                                      | DO NOT WRITE IN THIS SPACE  |                            |                       |
|   |  |  |                            |             |                                      | 3. Date Incorporated or Qualified 07/18/1997  |                            |                       |
| 2. Principal P  | Place of Business  | 2a. Mailing Address  |                            |             |                                      | 4. FEI Number   |                            | Applied For           |
| 21  |  | 26   |                            |             |                                      | 45-0360840  | <del>(</del>               | Not Applicable        |
| Suite, Apt.   | #. etc.  | Suite, Apt. #, etc.  |                            |             |                                      | 5. Certificate of Status Desired  | \$8.75                     | Additional            |
| 22  |  | 27   |                            |             |                                      | 5. Certificate of Status Desired  | Fee                        | Required              |
| City & Stat   | e  | City & State   |                            |             |                                      | 6. Election Campaign Financing Trust Fund Contribution  |                            | O May Be<br>d to Fees |
| Zip   | Country  | Zip  | Cou                        | ntry        |                                      | 8. This corporation owes or has paid the co   |                            |                       |
| 24  | 25 29 30   |  | 30                         |             |                                      | Personal Property Tax due June 30.  |                            | ₽,No                  |
| 2.2   | 9. Name and Address of Current   | Registered Agent   |                            |             |                                      | 10. Name and Address of New Registere   | d Agent                    |                       |
| C T CORPORATION SYSTEM  |  |  |                            | 81          | Name                                 |   |                            |                       |
|   | 00 South Pine Island Road<br>Antation FL 33324                                   | <u> </u>   |                            | 82          | Street Addres                        | ss (P.O. Box Number is Not Acceptable)  |                            |                       |
|   | WWW.TOWTE GOODS  |  | ŀ                          | 83          |                                      |   |                            |                       |
|   |  |  | ļ                          | 84          | City                                 |   | . 85 Z                     | p Code                |
| 44 5  | 10.00  | 1000 1000 000  |                            |             | <u> </u>                             | <b>_</b>  | L   `   `                  | ·                     |
| office or r   | to the provisions of Sections 607,0502 egistered agent, or both, in the State of | and 607.1508, Florida Statut<br>f Florida: Such change was a | es, the ab<br>authorized   | ove<br>i by | <ul> <li>named corporatio</li> </ul> | ration submits this statement for the purpose on's board of directors. I hereby accept the ap | of changing<br>pointment : | its registered        |
| agent. I a  |  | ons of, Section 607.0505, Flo                                | rida Statı                 | utes.       |                                      | 46  | 200                        | _                     |
| SIGNATURE Signature, typed or printed name of registered agent and talle it applicable. (NOTE Registered Ag |  |  |                            |             |                                      | s when reinstating) DATE  | 9-250                      | <b>*</b>              |
| 12.   | OFFICERS AND   |  | 13.                        | - igot      | n ognatare redemos                   | ADDITIONS/CHANGES TO OFFICERS AN  | VD DIRECTO                 | OBS IN 12             |
| TITLE   | PC   | DELETE 1.1 TIT   |                            | LE          |                                      |   | ☐ Change                   |                       |
| NAME  | PETERSON, MARK C   | 1,2 NA   |                            | ME          |                                      |   |                            | []                    |
| STREET ADDRESS  | 1021 S. 23RD ST. BOX 1735  |  | 1.3 ST                     |             | UDDRESS                              |   |                            |                       |
| CITY - ST - ZIP   | BISMARCK ND 58502  |  | 1.4 CI                     |             | - ZIP                                |   |                            |                       |
| TITLE   | VVC  | ☐ DELETE 2.1 T   |                            | LE          |                                      |   | Change                     | Addition C            |
| NAME  | KIENZLE, RON   |  | 2.2 NAME                   |             |                                      |   |                            |                       |
| STREET ADDRESS  | 1021 S. 23RD ST. BOX 1735  |  | 2.3 STREET                 |             | DDRESS                               |   |                            |                       |
| CITY-ST-ZIP   | BISMARCK ND 58502  |  | 2, 4 CITY-5                |             | r- ZIP                               |   |                            |                       |
| TITLE   | CLASSED DON D  |  | 3.1 TITI                   |             |                                      |   | L Change                   | Addition              |
| NAME  | 1001 C 00DD CT DOV 1705  |  | 3.2 NAI                    |             | İ                                    |   |                            |                       |
| STREET ADDRESS  | BISMARCK ND 58502  |  | 3.3 STREET                 |             |                                      | •   |                            | į                     |
| CITY-ST-ZIP<br>TITLE  | DIGMATION NO 30302   | DELETE   | 3.4. CITY - 5<br>4.1 TITLE |             | - ZIP                                | · · · · · · · · · · · · · · · · · · ·   | Chassa                     | F ( A 2/2)            |
| NAME  |  | ☐ DETEIE   | 4.7 IIII<br>4. 2 NA        |             |                                      |   | ☐ Change                   | ☐ Addition            |
| STREET ADDRESS  |  |  |                            |             | DOCCO                                |   |                            | İ                     |
| CITY-ST-ZIP   |  |  | 4.3 STREET                 |             |                                      |   |                            |                       |
| TITLE   |  | ☐ DELETE   | 4.4 CITY - S<br>5.1 TITLE  |             | · ZIP                                |   | Change                     | ☐ Addition            |
| NAME  |  | <b>_</b>   | 5.2 NAME                   |             |                                      |   | 0.m.ngo                    |                       |
| STREET ADDRESS  |  |  |                            |             | DDRESS                               |   |                            |                       |
| CITY-ST-ZIP   |  |  | 5.4 CIT                    |             |                                      |   |                            | Į                     |
| TITLE   |  | ☐ DELETE   | 6.1 TITLE                  |             |                                      |   | ☐ Change                   | Addition              |
| NAME  |  |  | 6.2 NAM                    |             |                                      |   | _ 6-                       |                       |
| STREET ADDRESS  |  |  | 4                          |             | DDRES\$                              |   |                            |                       |
| CITY-ST-ZIP   |  |  | 6.4 CIT                    |             | 1                                    |   |                            |                       |
| 14. I hereby c  | ertify that the information supplied with  | this filing does not qualify fo                              | r the exer                 | nptio       | on stated in Se                      | ection 119.07(3)(i), Florida Statutes, I further of   | ertify that th             | e information         |

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 suppliemental 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:

10 Don't Regularily Seil-Tren

1-19-90

201-222-0076