

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

PROFIT CORPORATION ANNUAL REPORT 1998



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

FILED
May 11 1998 8:00am
Secretary of State

DOCUMENT # P29977 (6)
1. Corporation Name
ICX CORPORATION



Principal Place of Business: 3 SUMMIT PARK DR #200 INDEPENDENCE OH 44131
Mailing Address: 3 SUMMIT PARK DR #200 INDEPENDENCE OH 44131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/27/1990	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 34-1583171	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City

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 signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	DIRECTOR
NAME	MARINIK, MARK S.	1.2 NAME	JOHN D. KOCH
STREET ADDRESS	3 SUMMIT PARK DRIVE	1.3 STREET ADDRESS	1215 SUPERIOR AVENUE
CITY-ST-ZIP	INDEPENDENCE OH	1.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114
TITLE	V	2.1 TITLE	DIRECTOR
NAME	BENDER, GERALD F.	2.2 NAME	RICHARD NEU
STREET ADDRESS	3 SUMMIT PARK DRIVE	2.3 STREET ADDRESS	1215 SUPERIOR AVENUE
CITY-ST-ZIP	INDEPENDENCE OH	2.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114
TITLE	VTD	3.1 TITLE	DIRECTOR
NAME	LOVINS, JAMES T.	3.2 NAME	CHARLES IPAVEC
STREET ADDRESS	3 SUMMIT PARK DRIVE	3.3 STREET ADDRESS	1215 SUPERIOR AVENUE
CITY-ST-ZIP	INDEPENDENCE OH	3.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114
TITLE	VS	4.1 TITLE	
NAME	BABBITT, MICHAEL R.	4.2 NAME	
STREET ADDRESS	3 SUMMIT PARK DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	INDEPENDENCE OH	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	
NAME	ROWLAND, ROBERT H.	5.2 NAME	
STREET ADDRESS	3 SUMMIT PARK DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	INDEPENDENCE OH	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	KOCH, CHARLES JOHN	6.2 NAME	
STREET ADDRESS	1215 SUPERIOR AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND OH	6.4 CITY-ST-ZIP	

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 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; that I am not a resident of the State of Florida; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Michael R. Babbitt* MICHAEL R. BABBITT Sr. Vice President 4/21/98 (216) 328-8700

CP2E034 (10/97)