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Mar 17, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P36032

1. Corporation Name
GILBARCO INC.



Principal Place of Business Mailing Address
 P.O. BOX 22087 P.O. BOX 22087
 GREENSBORO NC 27420 GREENSBORO NC 27420

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/23/1991

4. FEI Number **52-1504784** Applied For Not Applicable

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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 Zip Country 25 29 Zip Country 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	SNOWBERGER, MARK W.	
STREET ADDRESS	3303 KETTERING PLACE	
CITY-ST-ZIP	GREENSBORO NC	
TITLE	VCFO	<input type="checkbox"/> DELETE
NAME	CARLSON, CHARLES E.	
STREET ADDRESS	6719 BROOKBANK DRIVE	
CITY-ST-ZIP	SUMMERFIELD NC	
TITLE	T	<input type="checkbox"/> DELETE
NAME	JOHNSON, JEFFREY L.	
STREET ADDRESS	1208 HOUNSLOW DRIVE	
CITY-ST-ZIP	GREENSBORO NC	
TITLE	PCE	<input type="checkbox"/> DELETE
NAME	KORB, WILLIAM B.	
STREET ADDRESS	2704 LAKE FOREST DRIVE	
CITY-ST-ZIP	GREENSBORO NC	
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	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	David L. Kaehler	
1.3 STREET ADDRESS	207 N. Westgate Drive	
1.4 CITY-ST-ZIP	Greensboro, NC 27410	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	See Attached Listing	
2.3 STREET ADDRESS	for officers and Directors	
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 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, with all other like empowered.

SIGNATURE: *Jeffrey L. Johnson* **SIGNATURE REQUIRED** VICE PRES / CEO 1/27/99 334/547-533
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2F034 (1/98)

287947-40035-04
P36032

GILBARCO INC. OFFICERS AND DIRECTORS

Officers

President and Chief Executive Officer	William B. Korb	2704 Lake Forest Drive Greensboro, NC 27408
President-Gilbarco North America	David L. Kaehler	207 N. Westgate Drive Greensboro, NC 27410
Vice President, Secretary and General Counsel	Charles E. Carlson	6719 Brookbank Drive Summerfield, NC 27358
Vice President, Chief Financial Officer and Controller/Treasurer	Jeffrey L. Johnson	1208 Hounslow Drive Greensboro, NC 27410

Directors

William B. Korb	2704 Lake Forest Drive Greensboro, NC 27408
Jeffrey L. Johnson	1208 Hounslow Drive Greensboro, NC 27410
David L. Kaehler	207 N. Westgate Drive Greensboro, NC 27410