

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

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED

95 APR 23 PM 6:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 828216

(2)

1. Corporation Name

GRINNELL CORPORATION

Principal Place of Business

Mailing Address

ATTN: TAX DEPARTMENT
3 TYCO PARK
EXETER NH 03833

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3 TYCO PARK
EXETER NH 03833

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/28/1972

3a. Date of Last Report

04/26/1994

4. FEI Number

05-0346132

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 has liability for intangible tax under S. 190.032,
Florida Statutes



Yes



No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	HALL, TERRY L
STREET ADDRESS	1 TYCO PARK
CITY - ST - ZIP	EXETER NH
TITLE	PD
NAME	KOZLOWSKI, L DENNIS
STREET ADDRESS	1 TYCO PARK
CITY - ST - ZIP	EXETER NH
TITLE	ASD
NAME	GUTIN, IRVING
STREET ADDRESS	1 TYCO PARK
CITY - ST - ZIP	EXETER NH
TITLE	VS
NAME	DOHERTY, BERNARD J
STREET ADDRESS	1 TYCO PARK
CITY - ST - ZIP	EXETER NH
TITLE	AT
NAME	MILLR, BARBARA
STREET ADDRESS	1 TYCO PK
CITY - ST - ZIP	EXETER NH
TITLE	VP
NAME	FISH, THOMAS E
STREET ADDRESS	3 TYCO PK
CITY - ST - ZIP	EXETER NH

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	mark H. Swartz
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	Miller, Barbara
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	Assistant Secretary
6.3 STREET ADDRESS	Betty J. Bailey
6.4 CITY - ST - ZIP	1 Tyco Park Exeter NH 03833

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 110.07(3)(4), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Betty J. Bailey 3/17/95

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