

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002218

FILED
Feb 15, 2012
Secretary of State

Entity Name: AERO-MED LTD CO.

Current Principal Place of Business:

85 COMMERCE STREET
GLASTONBURY, CT 06033

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 151
GLASTONBURY, CT 06033

New Mailing Address:

FEI Number: 06-1132462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, MICHAEL D
1551 102ND AVE NORTH
SUITE D
ST. PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: DELMASTRO, DANIEL A
Address: 85 COMMERCE STREET
City-St-Zip: GLASTONBURY, CT 06033

Title: VP
Name: PANDISCIA, DANIEL J
Address: 85 COMMERCE STREET
City-St-Zip: GLASTONBURY, CT 06033

Title: CFO
Name: DONOVAN, PETER A
Address: 85 COMMERCE STREET
City-St-Zip: GLASTONBURY, CT 06033

Title: VP
Name: GAY, SHERI K
Address: 85 COMMERCE ST
City-St-Zip: GLASTONBURY, CT 06033

Title: VP
Name: MCGARRY, JILL H
Address: 85 COMMERCE ST
City-St-Zip: GLASTONBURY, CT 06033

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PETER DONOVAN

CFO

02/15/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date