

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001693

FILED
Jul 31, 2009
Secretary of State

Entity Name: COURION CORPORATION

Current Principal Place of Business:

1881 WORCESTER ROAD
FRAMINGTON, MA 01701

New Principal Place of Business:

Current Mailing Address:

1881 WORCESTER ROAD
FRAMINGTON, MA 01701

New Mailing Address:

FEI Number: 04-3313877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ZANNETOS, CHRISTOPHER
Address: 6 MONROE STREET
City-St-Zip: WELLESLEY, MA 02481

Title: S () Delete
Name: MILAS, BRIAN
Address: 160 WHITE STREET
City-St-Zip: BELMONT, MA 02478

Title: D () Delete
Name: HOWE, NILOO
Address: 2001 PENNSYLVANIA AVE NW, SUITE 400
City-St-Zip: WASHINGTON, DC 20006

Title: D () Delete
Name: AMOUYAL, PHILIPPE
Address: 750 LEXINGTON AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: PATTERSON, STUART
Address: 66 BURDITT AVENUE
City-St-Zip: HINGHAM, MA 02043

Title: D () Delete
Name: GRUNER, HARRY
Address: 2 HAMIL ROAD, SUITE 272
City-St-Zip: BALTIMORE, MD 21210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRIAN MILAS

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07/31/2009

Electronic Signature of Signing Officer or Director

Date