

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 91258 001 ***600.00

0323653

DOCUMENT # F95000004357

1. Entity Name
PHOTRONICS, INC.

Principal Place of Business Mailing Address
1061 E. INDIANTOWN RD **1061 E. INDIANTOWN RD**
SUITE 310 **SUITE 310**
JUPITER FL 33477 **JUPITER FL 33477**
US **US**

27913



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **06-0854886** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	MACRICOSTAS, CONSTANTINE S	
STREET ADDRESS	1061 E. INDIANTOWN RD	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	NORTHUP, JAMES R	
STREET ADDRESS	1061 E. INDIANTOWN RD	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE	D	<input type="checkbox"/> Delete
NAME	FIORITA, JOSEPH A JR	
STREET ADDRESS	146 DEER HILL AVE	
CITY-ST-ZIP	DANBURY CT 06810	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FIEDEROWICZ, WALTER M	
STREET ADDRESS	39 PAINTER HILL RD	
CITY-ST-ZIP	WOODBURY CT	
TITLE	VCF	<input type="checkbox"/> Delete
NAME	BOLLO, ROBERT J	
STREET ADDRESS	1061 E INDIANTOWN RD	
CITY-ST-ZIP	JUPITER FL	
TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	MOONAN, JEFFREY P ESQ	
STREET ADDRESS	1061 E INDIANTOWN RD	
CITY-ST-ZIP	JUPITER FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JAMES MAC DONALD	
STREET ADDRESS	2428 ONTARIO ST.	
CITY-ST-ZIP	BURBANK, CA 91504	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HICKEY, GREGORY	
STREET ADDRESS	15 SECOR RD	
CITY-ST-ZIP	BROOKFIELD, CT 06804	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	15 SECOR RD	
CITY-ST-ZIP	BROOKFIELD, CT 06804	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EDER, JAMES	
STREET ADDRESS	15 SECOR RD	
CITY-ST-ZIP	BROOKFIELD, CT 06804	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* Date: 2/23/01 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)