2000 UNIFORM BUSINESS REPORT (UBR)

May 13, 2000 8:00 am Secretary of State **DOCUMENT # P06066** 1. Entity Name CARRIER INTERNATIONAL CORPORATION 05-13-2000 90022 027 ***150.00 Principal Place of Business Mailing Address CARRIER PARKWAY CARRIER PARKWAY P.O.BOX 4808 P.O.BOX 4808 **SYRACUSE NY 13221-4808** SYRACUSE NY 13221 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 16-1220461 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition X Change ☐ Delete TITLE President TITLE LORD, JOHN NAME NAME Jonathan W. Ayers 38 PEMBROKE HILL ROAD STREET ADDRESS STREET ADDRESS 2 Iron Forge CITY-ST-ZIP CITY-ST-7tP **FARMINGTON CT** Avon, CT 06001 Delete Addition TITLE Vice President-Finance hange TITLE HITCHERY, REGINA NAME NAME George E. Minnich STREET ADDRESS STREET ADDRESS 27 JUNIPER LANE WEST 3 Fieldstone Lane CITY-ST-ZIP CITY-ST-ZIP **GLASTONBURY CT** Avon, CT 06001 ☐ Delete TITLE Change Addition TITLE WITZKY, CHRISTOPHER NAME NAME STREET ADDRESS STREET ADDRESS 54 SACHEM DR CITY-ST-ZIP CITY-ST-ZIP GLASTONBURY CT 06033 ☐ Delete Change Addition TITI F TITLE GALLI, ROBERT E NAME NAME STREET ADDRESS 329 NORTH STAR DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SOUTHINGTON CT AS ☐ Change Addition Delete TITLE TITLE SAVAGE, JOSEPH M NAME STREET ADDRESS 7885 E RIDGE POINTE DR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **FAYETTEVILE NY 13066** AS Change ☐ Addition ☐ Delete TITLE KARANIAN, SANDRA A

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indicated on this report or supplied with this illing 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 suppliemental 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 this 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 attainment with an address, with all other like empowered. OURSandra A. Karanian MOLO U. HOUNTED IN Sandra A. Karanian INATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR SESTISTANT SECRETARY SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

15 VALLEY VIEW DR

NEWINGTON CT 06111

STREET ADDRESS CITY-ST-ZIP