FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 AM 4:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P24864 (1)

1. Corporate Name
GULTON INDUSTRIES, INC.

Principal Place of Business
TAX DEPARTMENT
P O BOX 810
AMHERST NY 14226-7810

Mailing Address
TAX DEPARTMENT
P O BOX 810
AMHERST NY 14226-7810

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/21/1989
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # or Rm. — 22
Suite, Apt. # or Rm. — 27
City & State — 23
City & State — 28
Zip — 24: 14226-0810 — County — 25
Zip — 29: 14226-0810 — County — 30

4. FEI Number: 22-1850850 — 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. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
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 Section [illegible], 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 [illegible] Florida Statutes.

SIGNATURE
[illegible]

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	TITLE	☐ Change ☒ Addition
NAME	MONTAGUE, WILLIAM P	NAME	
STREET ADDRESS	9695 ROCKY POINT	STREET ADDRESS	
CITY, ST, ZIP	CLARENCE NY	CITY, ST, ZIP	14031
TITLE	PD	TITLE	☐ Change ☒ Addition
NAME	ARRISON, CLEMENT R.	NAME	
STREET ADDRESS	70 FARMINGTON RD.	STREET ADDRESS	
CITY, ST, ZIP	WILLIAMSVILLE NY	CITY, ST, ZIP	14221
TITLE	SD	TITLE	☐ Change ☒ Addition
NAME	LIPPES, GERALD S.	NAME	
STREET ADDRESS	77 MIDDLESEX RD	STREET ADDRESS	
CITY, ST, ZIP	BUFFALO NY	CITY, ST, ZIP	14216
TITLE	VTS	TITLE	☐ Change ☒ Addition
NAME	BYRNE, JOHN J.	NAME	
STREET ADDRESS	89 HALSTON PKWY	STREET ADDRESS	
CITY, ST, ZIP	E. AMHERST NY	CITY, ST, ZIP	14051
TITLE	CD	TITLE	☐ Change ☒ Addition
NAME	ALFIERO, SAL H.	NAME	
STREET ADDRESS	1003 ADMIRALS WALK-200 LAKEFRONT BLVD	STREET ADDRESS	
CITY, ST, ZIP	BUFFALO NY	CITY, ST, ZIP	14202
TITLE	VP	TITLE	☐ Change ☒ Addition
NAME	FREDERIC L. COOK	NAME	
STREET ADDRESS	6415 WOODBERRY COURT	STREET ADDRESS	
CITY, ST, ZIP	EAST AMHERST NY	CITY, ST, ZIP	14051

14. I hereby certify that the information supplied with this report, voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on the 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 above or on an attachment with an address.

SIGNATURE: Joseph Malnowski — Joseph Malnowski — 4/11/95 — (716) 689-4972
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

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