

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005938

FILED
Apr 10, 2008
Secretary of State

Entity Name: FORNEY CORPORATION

Current Principal Place of Business:

3405 WILEY POST ROAD
CARROLLTON, TX 75006 US

New Principal Place of Business:

Current Mailing Address:

9 FARM SPRINGS RD
FARMINGTON, CT 06032 US

New Mailing Address:

FEI Number: 51-0354053 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CONROY, JOHN
Address: 3405 WILEY POST RD
City-St-Zip: CARROLLTON, TX 75006 US

Title: S () Delete
Name: PERRAULT, ALICIA
Address: 9 FARM SPRINGS RD
City-St-Zip: FARMINGTON, CT 06032 US

Title: T () Delete
Name: HARRISON, KATHIE LEE
Address: 3405 WILEY POST ROAD
City-St-Zip: CARROLLTON, TX 75006 US

Title: D () Delete
Name: JOHRI, AKHIL
Address: 9 FARM SPRINGS RD
City-St-Zip: FARMINGTON, CT 06032 US

Title: D () Delete
Name: LINDROTH, BRIAN
Address: 9 FARM SPRINGS RD
City-St-Zip: FARMINGTON, CT 06032 US

Title: D () Delete
Name: WINE, SCOTT
Address: 9 FARM SPRINGS RD
City-St-Zip: FARMINGTON, CT 06032 US

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: D (X) Change () Addition
Name: FOLSOM, HAROLD
Address: 9 FARM SPRINGS RD
City-St-Zip: FARMINGTON, CT 06032 US

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: SCOTT WINE

D

04/10/2008

Electronic Signature of Signing Officer or Director

_____ Date