

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003261

Entity Name: MARINE ACOUSTICS, INC.

Current Principal Place of Business:

14581 OCEAN BLUFF DRIVE
FORT MYERS, FL 33908

Current Mailing Address:

809 AQUIDNECK AVENUE
MIDDLETOWN, RI 02842

FEI Number: 04-2993452

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

Officer/Director Detail :

Title SECRETARY, TREASURER,
DIRECTOR, VP
Name ELLISON, WILLIAM T
Address 260 ODIORNE RD.
City-State-Zip: PORTSMOUTH NH 03801

Title CFO, VP, OFFICER, DIRECTOR
Name GOMES, PATRICIA A
Address 831 BULGARMARSH ROAD
City-State-Zip: TIVERTON RI 02878

Title CEO, VP, DIRECTOR, OFFICER
Name SPIKES, CLAYTON H
Address 14581 OCEAN BLUFF DRIVE
City-State-Zip: FORT MYRES FL 33908

Title PRESIDENT, DIRECTOR, OFFICER
Name STEWART, THOMAS
Address 224 ADELAIDE AVENUE
City-State-Zip: PROVIDENCE RI 02907

Title VP, DIRECTOR, OFFICER
Name GRAF, KENNETH
Address 121 MORAINES COURT
City-State-Zip: SOUTH KINGSTOWN RI 02879

Title VP, OFFICER, DIRECTOR
Name VIGNESS-RAPOSA, KATHLEEN J
Address 20 BOYER STREET
City-State-Zip: NORTH KINGSTOWN RI 02852

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA A. GOMES

CFO

02/19/2014

Electronic Signature of Signing Officer/Director Detail

Date