

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000002257

**Entity Name:** GERBER SCIENTIFIC INTERNATIONAL, INC.

**Current Principal Place of Business:**

24 INDUSTRIAL PARK ROAD WEST  
TOLLAND, CT 06084

**Current Mailing Address:**

24 INDUSTRIAL PARK ROAD WEST  
TOLLAND, CT 06084

**FEI Number: 06-0850140**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
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            PRESIDENT, DIRECTOR  
Name            MICHAEL, ELIA R  
Address        24 INDUSTRIAL PARK ROAD WEST  
City-State-Zip: TOLLAND CT 06084

Title            VP, SECRETARY  
Name            KRALIC, DAVID A  
Address        24 INDUSTRIAL PARK ROAD WEST  
City-State-Zip: TOLLAND CT 06084

Title            VP  
Name            WANG, JOHNNY  
Address        24 INDUSTRIAL PARK ROAD WEST  
City-State-Zip: TOLLAND CT 06084

Title            VP  
Name            BURMAHL, PATRICIA  
Address        24 INDUSTRIAL PARK ROAD WEST  
City-State-Zip: TOLLAND CT 06084

Title            TREASURER  
Name            MARTIN, JAMES C  
Address        24 INDUSTRIAL PARK ROAD WEST  
City-State-Zip: TOLLAND CT 06084

Title            VP  
Name            WATSON, KAREN L  
Address        24 INDUSTRIAL PARK ROAD WEST  
City-State-Zip: TOLLAND CT 06084

Title            ASST. TREASURER  
Name            KENNY, THERESA A,  
Address        24 INDUSTRIAL PARK ROAD WEST  
City-State-Zip: TOLLAND CT 06084

*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: DAVID A. KRALIC**

**SECRETARY**

**04/24/2014**

Electronic Signature of Signing Officer/Director Detail

Date