

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 474364

FILED
Jul 13, 2009
Secretary of State**Entity Name:** INSTRUMENT TRANSFORMERS, INC.**Current Principal Place of Business:**1907 CALUMET STREET
CLEARWATER, FL 33765 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 2216
SCHENECTADY, NY 12301 US**New Mailing Address:****FEI Number:** 59-1582077**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 RD.
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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LARR
Address: 215 ANDERSON AVE MARKHAM
City-St-Zip: ONTARIO, NA L6E 1B3 CA

Title: S () Delete
Name: JAMES
Address: OHIO LAMP PLANT
City-St-Zip: WARREN, OH 44483 US

Title: V () Delete
Name: MARK
Address: 12 CORPORATE WOODS, BLVD
City-St-Zip: ALBANY, NY 12211 US

Title: V () Delete
Name: BARBARA
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

Title: D () Delete
Name: ROBERTO
Address: 1907 CALUMET STREET
City-St-Zip: CLEARWATER, FL 33765 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOLLECITO, LARR
Address: 215 ANDERSON AVE MARKHAM
City-St-Zip: ONTARIO, NA L6E 1B3 CA

Title: S (X) Change () Addition
Name: FLYNN, JAMES
Address: OHIO LAMP PLANT
City-St-Zip: WARREN, OH 44483 US

Title: V (X) Change () Addition
Name: BUCHANAN, MARK
Address: 12 CORPORATE WOODS, BLVD
City-St-Zip: ALBANY, NY 12211 US

Title: V (X) Change () Addition
Name: CAMERON, BARBARA
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

Title: D (X) Change () Addition
Name: VENGOCHEA, ROBERTO
Address: 1907 CALUMET STREET
City-St-Zip: CLEARWATER, FL 33765 US

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: BARBARA CAMERON

V

07/13/2009

Electronic Signature of Signing Officer or Director

Date