

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 805498

FILED  
Feb 24, 2005  
Secretary of State

Entity Name: HERBERT J. SIMS CO., INC.

## Current Principal Place of Business:

1221 POST ROAD EAST  
WESTPORT, CT 06880 US

## New Principal Place of Business:

3530 POST ROAD  
SOUTHPORT, CT 068901169 US

## Current Mailing Address:

1221 POST ROAD EAST  
WESTPORT, CT 06880 US

## New Mailing Address:

3530 POST ROAD  
SOUTHPORT, CT 068901169 US

FEI Number: 13-5213180

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. 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: STD ( ) Delete  
Name: FREDA, GENEVIEVE,  
Address: 1221 POST RD E  
City-St-Zip: WESTPORT, CT 06880

Title: CEOC ( ) Delete  
Name: SIMS, WILLIAM B.,  
Address: 1221 POST RD E  
City-St-Zip: WESTPORT, CT 06880

Title: P ( ) Delete  
Name: APPELBAUM, ALAN Z  
Address: 1221 POST RD. E.  
City-St-Zip: WESTPORT, CT 06880

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition  
Name: FREDA, GENEVIEVE,  
Address: 3530 POST ROAD  
City-St-Zip: SOUTHPORT, CT 068901169 US

Title: CEOC (X) Change ( ) Addition  
Name: SIMS, WILLIAM B.,  
Address: 3530 POST ROAD  
City-St-Zip: SOUTPORT, CT 068901169 US

Title: P (X) Change ( ) Addition  
Name: APPELBAUM, ALAN Z  
Address: 3530 POST ROAD  
City-St-Zip: SOUTHPORT, CT 068901169 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PETER ARVONIO

SVP

02/24/2005

Electronic Signature of Signing Officer or Director

Date