

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 826031

**FILED**  
**Jun 21, 2011**  
**Secretary of State**

**Entity Name:** PACIFIC SCIENTIFIC COMPANY

**Current Principal Place of Business:**

1800 HIGHLAND AVE  
DUARTE, CA 91010

**New Principal Place of Business:**

**Current Mailing Address:**

6095 PARKLAND BLVD.  
SUITE 310  
MAYFIELD HTS, OH 44124 US

**New Mailing Address:**

1955 SURVEYOR AVENUE  
SIMI VALLEY, CA 93063 US

**FEI Number:** 94-0744970

**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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HUTTON, DENNIS  
Address: 1800 HIGHLAND AVENUE  
City-St-Zip: DUARTE, CA 91010

Title: VPT  
Name: LITTLE, THOMAS  
Address: 1800 HIGHLAND AVENUE  
City-St-Zip: DUARTE, CA 91010

Title: VPSD  
Name: LARDIERE, ERIC G  
Address: 1955 SURVEYOR AVENUE  
City-St-Zip: SIMI VALLEY, CA 93063

Title: ATAS  
Name: ZAGALA, GENE P  
Address: 1955 SURVEYOR AVENUE  
City-St-Zip: SIMI VALLEY, CA 93063

Title: D  
Name: ZAGALA, GENE P  
Address: 1955 SURVEYOR AVENUE  
City-St-Zip: SIMI VALLEY, CA 93063

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: ERIC G. LARDIERE

VP

06/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date