

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827270

Entity Name: FCI USA, INC.

FILED
Mar 16, 2009
Secretary of State

Current Principal Place of Business:

825 OLD TRAIL RD
ETTERS, PA 17319

New Principal Place of Business:

Current Mailing Address:

825 OLD TRAIL RD
ETTERS, PA 17319

New Mailing Address:

FEI Number: 06-0669929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: SVP () Delete
Name: STEPS, B. JILL
Address: 825 OLD TRAIL RD
City-St-Zip: ETTERS, PA 17319

Title: CDCE () Delete
Name: LAMY, JEAN-LUCIEN
Address: 145 RAE YUES LE COZ
City-St-Zip: VERSAILLES, FR 78035

Title: T () Delete
Name: CALLAHAN, DONALD
Address: 28100 CABOT DR STE 100
City-St-Zip: NOVI, MI 48377

Title: AS () Delete
Name: PAGE, RICHARD
Address: 825 OLD TRAIL RD
City-St-Zip: ETTERS, PA 17319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CDCE (X) Change () Addition
Name: VAREILLE, PIERRE
Address: 145 RUE YVES LE COZ
City-St-Zip: VERSAILLES, FR 78035

Title: T (X) Change () Addition
Name: CALLAHAN, DONALD J
Address: 825 OLD TRAIL ROAD
City-St-Zip: ETTERS, PA 17319

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: B. JILL STEPS

SVP

03/16/2009

Electronic Signature of Signing Officer or Director

_____ Date