

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 831591

FILED
Apr 27, 2009
Secretary of State

Entity Name: VULCRAFT SALES CORPORATION

Current Principal Place of Business:

300 DELAWARE AVENUE
SUITE 545
WILMINGTON, DE 19801 US

New Principal Place of Business:

Current Mailing Address:

300 DELAWARE AVENUE
SUITE 545
WILMINGTON, DE 19801 US

New Mailing Address:

FEI Number: 56-1057443 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: DPST () Delete
Name: BROMLEY, DONALD J
Address: 300 DELAWARE AVE., STE. 545
City-St-Zip: WILMINGTON, DE 19801

Title: D,VP () Delete
Name: COPPOCK, STEVE
Address: 300 DELAWARE AVE., STE. 545
City-St-Zip: WILMINGTON, DE 19801

Title: D,VP () Delete
Name: LIENBY, TERRY S
Address: 300 DELAWARE AVE., STE. 545
City-St-Zip: WILMINGTON, DE 19801

Title: AS () Delete
Name: BOWERS, ELIZABETH W
Address: 300 DELAWARE AVE., STE. 545
City-St-Zip: WILMINGTON, DE 19801

Title: AS () Delete
Name: EAGLE, A. RAE
Address: 300 DELAWARE AVE., STE. 545
City-St-Zip: WILMINGTON, DE 19801

Title: D,AS () Delete
Name: FRIAS, JAMES D
Address: 300 DELAWARE AVE., STE. 545
City-St-Zip: WILMINGTON, DE 19801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOACH, JOHN J
Address: 300 DELAWARE AVE., STE. 545
City-St-Zip: WILMINGTON, DE 19801

Title: DST (X) Change () Addition
Name: PANACCIONE, ANDREW T
Address: 300 DELAWARE AVE., STE. 545
City-St-Zip: WILMINGTON, DE 19801

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

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

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

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: ELIZABETH W. BOWERS

AS

04/27/2009

Electronic Signature of Signing Officer or Director

Date