2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#839635

Entity Name: CORNING INCORPORATED

FILED Jan 20, 2009 Secretary of State

Thirty Name: Continue in Conti				
Current Principal Place of Business:			New Princ	ipal Place of Business:
ONE RIVER	RFRONT PLA	ZA		
CORNING,	NY 14831	US		
Current Mailing Address:			New Mailii	ng Address:
ONE RIVERFRONT PLAZA				
HQ-E2-11 CORNING, NY 14831 US				
FEI Number: 16-0393470 FEI Number Applied For () FEI Nu		mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Address of New Registered Agent:
CORPORATION SERVICE COMPANY				
1201 HAYS STREET TALLAHASSEE, FL 323012525 US				
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:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	V () ASBECK, KATH 2471 MORNING CORNING, NY		Title: Name: Address: City-St-Zip:	SR V (X) Change () Addition ASBECK, KATHERINE ONE RIVERFRONT PLAZA CORNING, NY 14831
Title: Name: Address: City-St-Zip:	S () HAUSELT, DEN 164 DELEVAN CORNING, NY	AVE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition HAUSELT, DENISE ONE RIVERFRONT PLAZA CORNING, NY 14831
Title: Name: Address: City-St-Zip:	VP () AIELLO, LARR' 5 FOX LANE E PAINTED POS	AST	Title: Name: Address: City-St-Zip:	TR (X) Change () Addition ROGUS, MARK ONE RIVERFRONT PLAZA CORNING, NY 14831
Title: Name: Address: City-St-Zip:	VPC () FLAWS, JAME 138 W HILL TE PAINTED POST	RR	Title: Name: Address: City-St-Zip:	VPC (X) Change () Addition FLAWS, JAMES B ONE RIVERFRONT PLAZA PAINTED POST, NY 14831
Title: Name: Address: City-St-Zip:	C () HOUGHTON, JA SPENCER HILI CORNING, NY	ROAD	Title: Name: Address: City-St-Zip:	C (X) Change () Addition HOUGHTON, JAMES 80 EAST MARKET STREET CORNING, NY 14830
Title: Name: Address: City-St-Zip:	CCEO () GUND, GORDO 14 NASSAU ST PRINCETON, N	, PO BOX 449	Title: Name: Address: City-St-Zip:	() Change () Addition

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: SUSAN L FORD DIVV 01/20/2009