2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 839948** May 01, 2000 8:00 am Secretary of State SONITROL CORPORATION 05-01-2000 90364 010 ***150.00 Principal Place of Business Mailing Address 1800 DIAGONAL RD ONE TYCO CENTER RD **BOCA RATON FL 33486 STE 180** ALEXANDRIA VA 22314 2. Principal Place of Business 3. Mailing Address 5035 PO Box Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Boca Ration Applied For City & State 4. FEI Number 35-1051688 Not Applicable Country Zip \$8.75 Additional USA 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11, 11. OFFICERS AND DIRECTORS 12. Change TY Addition TITI F ☑ Delete TITLE Jerry R. Boggess / Director SNYDER, MICHAEL NAME NAME One Town Center Rd STREET ADDRESS STREET ADDRESS ONE TOWN CENTER ROAD Boca Raton, Fl 33486 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33486** Delete ☐ Addition ☐ Change TITLE GUARNIERI, JOHN J NAME NAME STREET ADDRESS STREET ADDRESS ONE TYCO PARK EXETER NH 03833 CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE DOHERTY, BERNARD J NAME NAME STREET ADDRESS ONE TYCO PARK STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EXETER NH 03833 TITLE ☐ Delete TITLE Change Addition ROBINSON, MICHAEL A NAME NAME STREET ADDRESS ONE TOWN CENTER ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33486** VP | Asst Treasurer TITLE Delete TITLE ☐ Addition NAME STEVENSON, SCOTT NAME STREET ADDRESS ONE TOWN CENTER ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BOCA RATON FL 33486** Delete Secretary Change ☐ Addition TITLE TITLE MOROZE, M. BRIAN NAME NAME STREET ADDRESS STREET ADDRESS ONE TYCO PARK

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. VP/ASSISTANT TREASURER SIGNATURE: ٠.٤ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

CITY-ST-7IP

EXETER NH 03833