

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 840663

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: FLETCHER-THOMPSON, INC.

**Current Principal Place of Business:**

THREE CORPORATE DRIVE  
SUITE 500  
SHELTON, CT 06484

**New Principal Place of Business:**

**Current Mailing Address:**

THREE CORPORATE DRIVE  
SUITE 500  
SHELTON, CT 06484

**New Mailing Address:**

FEI Number: 06-0349730      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MONROE, W. BRADLEY  
239 E. VIRGINIA STREET  
TALLAHASSEE, FL 32301      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: P      ( ) Delete  
Name: BEAUDIN, JAMES A  
Address: 108 ROBERTON CROSSING  
City-St-Zip: FAIRFIELD, CT 06432

Title: V      ( ) Delete  
Name: OLIVETO, JOHN C  
Address: 20 FAIRLAWN DRIVE  
City-St-Zip: WALLINGFORD, CT 06482

Title: T      ( ) Delete  
Name: MARCINEK, MICHAEL S  
Address: 6 DAHLIA LANE  
City-St-Zip: SEYMOUR, CT 06483

Title: S      ( ) Delete  
Name: BOGGS, RICHARD C  
Address: 90 PUTTING GREEN ROAD  
City-St-Zip: TRUMBULL, CT 06611

Title: V      ( ) Delete  
Name: FANTACONE, THOMAS  
Address: 28 WHITNEY ROAD  
City-St-Zip: SHORT HILLS, NJ 07078

Title: V      ( ) Delete  
Name: KING, JACK A  
Address: 306 SAMUEL PLACE  
City-St-Zip: SOMERSET, NJ 08873

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: BEAUDIN, JAMES A  
Address: 4884 HAMPSHIRE COURT UNIT 301  
City-St-Zip: NAPLES, FL 34112

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:

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: MICHAEL S. MARCINEK

TREA

02/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date