

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 AUG 12 PM 2:24

DOCUMENT # 843583

1. Entity Name
CARRIER CORPORATION



Principal Place of Business
6304 CARRIER PKWY.
P.O. BOX 4808
SYRACUSE, NY 13221

Mailing Address
6304 CARRIER PKWY.
P.O. BOX 4808
SYRACUSE, NY 13221

2. Principal Place of Business
One Carrier Pl
Suite, Apt. #, etc.

3. Mailing Address
One Carrier Pl
Suite, Apt. #, etc.

City & State
Farmington CT
Zip
06034

Country
USA

City & State
Farmington CT
Zip
06034

Country
USA

08102005 Chg-P CR2E034 (10/03)

4. FEI Number
06-0991716

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE AS
NAME HOOF, JAMES V
STREET ADDRESS ONE FINANCIAL PLAZA
CITY-ST-ZIP HARTFORD, CT 06101 ☐ Delete

TITLE P
NAME DARNIS, GERAUD
STREET ADDRESS 19 COBBTAIL WAY
CITY-ST-ZIP SIMSBURY, CT 06070 ☐ Delete

TITLE VPGC
NAME GALLI, ROBERT E
STREET ADDRESS 329 NORTH STAR DR
CITY-ST-ZIP SOUTHTONING, CT ☒ Delete

TITLE T
NAME WITZKY, CHRISTOPHER
STREET ADDRESS 54 SACHEM DRIVE
CITY-ST-ZIP GLASTONBURY, CT 06033 ☐ Delete

TITLE VPCF
NAME MESSINA, ANGELO
STREET ADDRESS ONE CARRIER PLACE
CITY-ST-ZIP FARMINGTON, CT 06034 ☐ Delete

TITLE AS
NAME HILL, ROBERT N
STREET ADDRESS 4037 LIBRA LANE
CITY-ST-ZIP LIVERPOOL, NY ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPGC
NAME Charles D. Gill
STREET ADDRESS 128 Angyle Ave
CITY-ST-ZIP West Hartford, CT 06107 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
500058693885
08/17/05--01040--008 **\$61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *[Signature]* Assistant Secretary August 1, 05 860674399
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #