2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT #854057** Mar 04, 2000 8:00 am Secretary of State HAYDON SWITCH & INSTRUMENT, INC. 03-04-2000 90051 005 ***150.00 Principal Place of Business Mailing Address 1500 MERIDEN ROAD 1500 MERIDEN ROAD WATERBURY CT 06705 WATERBURY CT 06705-3910 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 95-1542776 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent -- 7. Name and Address of New Registered Agent THE PRENTICE-HALL, CORP. SYSTEM I Street Address (P.O. Box Number is Not Acceptable) 110 N. MAGNOLIA ST. TALLAHASSEE FL 32301 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 10. Election Campaign Financing \$5.00 May Be 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete Change Addition DUBOIS, BERNARD C. NAME NAME STREET ADDRESS STREET ADDRESS 1500 MERIDEN ROAD CITY-ST-ZIP CITY-ST-ZIP WATERBURY CT Addition TITLE Delete TITLE Change NAME CALDER, DONALD G. NAME 540 MADISON AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY ☐ Change ☐ Addition Delete TITLE TITLE GOODMAN, LAWRENCE NAME NAME STREET ADDRESS STREET ADDRESS 101 PARK AVENUE CITY - ST - ZIP CITY-ST-718 **NEW YORK NY** TITLE ☐ Delete TITLE ☐ Change ☐ Addition OHRSTROM.. GEORGE NAME NAME STREET ADDRESS STREET ADDRESS 540 MADISON AVENUE CITY-ST-7IP CITY-ST-ZIP NY NY TITLE ☐ Delete TITLE Change ☐ Addition FRANCO, JOSEPH G NAME NAME STREET ADDRESS STREET ADDRESS 1500 MERIDAN ROAD CITY-ST-ZIP CITY-ST-ZIP WATERBURY CT TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 eppowered.

SIGNATURE:

MULTINE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer yrzhon

2/2000 2037567