**FILED** 

## 2002 Uniform Business Report (UBR)

## Apr 01, 2002 8:00 am Secretary of State DOCUMENT # 854057 1. Entity Name 04-01-2002 90672 011 \*\*\*150.00 HAYDON SWITCH & INSTRUMENT, INC. Principal Place of Business Mailing Address 1500 MERIDEN ROAD 1500 MERIDEN ROAD WATERBURY CT 06705 WATERBURY CT 06705 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 · Triffeinition 1:1 Country \$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 Name THE PRENTICE-HALL, CORP. SYSTEM I Street Address (P.O. Box Number is Not Acceptable) 110 N. MAGNOLIA ST. TALLAHASSEE FL 32301 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9: This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRESIDENT SAR STORY OF Delete TITLE ☐ Change ☐ Addition CR2E034 (9/01 NAME DUBOIS, BERNARD C. NAME STREET ADDRESS STREET ADDRESS 1500 MERIDEN ROAD CITY-ST-ZIP CITY-ST-ZIP WATERBURY CT TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME CALDER, DONALD G. STREET ADDRESS STREET ADDRESS 540 MADISON AVE CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME GOODMAN, LAWRENCE STREET ADDRESS STREET ADDRESS 101 PARK AVENUE CITY-ST-7tP CITY-ST-ZIP NEW YORK NY ☐ Delete ☐ Change ☐ Addition TITLE TITLE. NAME NAME OHRSTROM.. GEORGE STREET ADDRESS STREET ADDRESS 540 MADISON AVENUE CITY-ST-ZIP CITY-ST-ZIP NY NY ☐ Defete Addition NAME NAME FRANCO, JOSEPH G 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

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.

13. Thereby 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

SIGNATURE:

STRANDE OUTOSEON G. Franco Treasurer 3/20/02

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date