2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0000001078

Entity Name: HAMILTON SUNDSTRAND MANAGEMENT SERVICES, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
ONE HAMILTON ROAD, WINDSOR LOCKS, CT 060961010						
Current Mailing Address:				New Mailing Address:		
ONE HAMILTON ROAD, WINDSOR LOCKS, CT 060961010			4747 HARRISON AVENUE MS 110-6 ROCKFORD, IL 61108			
FEI Number: 06-1165866 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
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:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () E FRANCIS, EDWA ONE HAMILTON WINDSOR LOCK	ROAD		Title: Name: Address: City-St-Zip:	P (X) Change (LEDUC, ROBERT ONE HAMILTON ROAD WINDSOR LOCKS, CT 06	
Title: Name: Address: City-St-Zip:	SD ()E GARDINER, CLIN ONE HAMILTON WINDSOR LOCK	ROAD		Title: Name: Address: City-St-Zip:	()Change() Addition
Title: Name: Address: City-St-Zip:	T () E ANDERSON, SID ONE HAMILTON WINDSOR LOCK	ROAD		Title: Name: Address: City-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	D () E LONGO, PETER ONE HAMILTON WINDSOR LOCK	ROAD		Title: Name: Address: City-St-Zip:	()Change() Addition
Title: Name: Address: City-St-Zip:	AS ()E HAINES, VICTOR 4747 HARRISON ROCKFORD, IL	AVENUE		Title: Name: Address: City-St-Zip:	()Change() Addition
Title: Name: Address: City-St-Zip:	LEDUC, ROBERTONE HAMILTON			Title: Name: Address: City-St-Zip:	AS (X) Change (RUA, CHRISTINE E ONE HAMILTON ROAD WINDSOR LOCKS, CT 06	,

I hereby certify that the information supplied with this filing does not qualify for the 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: VICTORIA M. HAINES AS 04/23/2007