

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # F00000004047 1. Entity Name F-P DISPLAYS, INC.	
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Principal Place of Business 456 GLENBROOK DRIVE STAMFORD, CT 06906	Mailing Address PO BOX 810 AMHERST, NY 14226
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04072006 No Chg-P CR2E034 (11/05)

4. FEI Number
04-2843765

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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**DO NOT WRITE
IN THIS SPACE**

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 re-installing) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

1000000547611
05/12/06-80019-022 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MONTAGUE, WILLIAM 501 JOHN JAMES AUDUBON PKWY. AMHERST, NY 14228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRENOLDS, RICHARD L 501 JOHN JAMES AUDUBON PKWY. AMHERST, NY 14228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT BARBERIO, MARK G 501 JOHN JAMES AUDUBON PKWY. AMHERST, NY 14228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEELE, EDWARD R. 501 JOHN JAMES AUDUBON PKWY. AMHERST, NY 14228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 information.

SIGNATURE: Edward R. Steele
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/06

Date

716/689-4972

Daytime Phone #