2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004047

STEELE, EDWARD R.

AMHERST, NY 14228

501 JOHN JAMES AUDUBON PKWY.

Name:

Address:

City-St-Zip:

Entity Name: F-P DISPLAYS, INC.

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 456 GLENBROOK DRIVE STAMFORD, CT 06906 **Current Mailing Address: New Mailing Address:** PO BOX 810 AMHERST, NY 14226 FEI Number: 04-2843765 FEI Number Applied For () FEI Number 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 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: () Delete Title: (X) Change () Addition MONTAGUE, WILLIAM BARBERIO, MARK G Name: Name: 501 JOHN JAMES AUDUBON PKWY. 501 JOHN JAMES AUDUBON PKWY. Address: Address: City-St-Zip: AMHERST, NY 14228 City-St-Zip: AMHERST, NY 14228 Title: VΡ Title: VΡ () Delete (X) Change () Addition Name: GRENOLDS, RICHARD L Name: STEELE, EDWARD R 501 JOHN JAMES AUDUBON PKWY. 501 JOHN JAMES AUDUBON PKWY. Address: Address: AMHERST, NY 14228 AMHERST, NY 14228 City-St-Zip: City-St-Zip: Title: VPT Title: (X) Delete () Change () Addition BARBERIO, MARK G Name: Name: 501 JOHN JAMES AUDUBON PKWY. Address: Address: City-St-Zip: AMHERST, NY 14228 City-St-Zip: Title: VΡ (X) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: EDWARD R. STEELE VP 04/17/2009