2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 22, 2005 8:00 am Secretary of State

DOCUMENT # F0100004926 1. Entity Name INTEGRIS INC.							03-22-2005 9	90015 016 *	***150.0	00	
Principal Place 300 CONCOR BILLERICA, M	D ROAD	Maiting Address 300 CONCORD ROAD BILLERICA, MA 01821				20023885					
296 C	ace of Business	3. Mailing Address 296 CONCORD ROAD									
Suite, Apt. SUITE:	# 180	Suite, Apt. #, etc. SUITE# 180				03162005	Chg-P	CR2E034	(10/03)		
City & State BILLE	RICA, MA	City & State BILLERICA, MA				4. FEI Numbe 04-357				Applicable	
^{Zip} 01821	Country US	Zip 01821	Count	-		5. Certificate of Status Desired S8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION, FL 33324											
						······-		FL	Zip Code	1	
B. 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											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.						00 May Be od to Fees					
10.	OFFICERS AND		11.			ADDITIONS	CHANGES TO OF				
TITLE NAME	PCD BURBANK, JONATHAN	Delete	TITLE	I				, ÚX	Change	Addition	
STREET ADDRESS	300 CONCORD ROAD			ET ADDRESS	296	CONCC	ORD ROAD	SUITE#	180		
CITY-ST-ZIP	BILLERICA, MA 01821	☐ Dalete	CAY-	-ST-ZIP				N.	Change	Addition	
NAME	PELLISSIER, GERVAIS	LJ Dage	NAME						1 CHAING	C Addition	
STREET ADDRESS CITY-ST-ZIP	68, ROUTE DE VERSAILLES LOUVECIENNES, FRANCE,			et adoress -st-zip			JAURES	OTC E	1D 3 310	-	
TITLE	T	☐ Delete	TITLE		7.10.6	CLAIL	IS-SOUS-I		RANC Change	Addition	
NAME	BRADBURY, DAVID		NAME	Ε			_		_ •	_	
STREET ADDRESS City-St-Zip	300 CONCORD ROAD BILLERICA, MA 01821			ET ADDRESS - ST-ZIP	296	CONCC	ORD ROAD	SUITE#	180		
TITLE	D LOVALI CUBISTIAN	Delete	TITLE					D	Change	Addition	
NAME STREET ADDRESS	LOYAU, CHRISTIAN 68 ROUTE DE VERSAILLES		NAMI STRE	ET ADORESS	RUE	JEAN	JAURES				
GITY-ST-ZIP	LOUVECIENNES, FR 78434			-ST-ZIP			S-SOUS-I	BOIS. F	'RANC	E	
TITLE	S COLE KURT	Delete	TITLE	I				7	Change	Addition	
NAME Street adoress	OGLE, KURT 300 CONCORD ROAD		nami Stre	et adoress	296	CONC	ORD ROAD	SUITE#	180		
GITY-ST-ZIP	BILLERICA, MA 01821		CITY	- ST - ZIP							
TITLE NAME		☐ Delete	TITLE NAMI] Change	Addition	
STREET ADDRESS				ET ADDRESS							
CITY-ST-ZIP				- ST - ZIP							
12. I hereby certify that the Information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											

KIRT OGLE SECRETARY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF DIRECTOR

SIGNATURE: _