2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003877

Entity Name: MAXWELL SYSTEMS PENNSYLVANIA, INC.

FILED Feb 27, 2006 Secretary of State

Current Principal Place of Business: 2500 DEKALB PIKE			New Princ	New Principal Place of Business:	
NORRISTOWN, PA 19401					
Current Mailing Address:			New Mailir	New Mailing Address:	
2500 DEKALB PIKE NORRISTOWN, PA 19401					
FEI Number: 23-1723672 FEI Number Applied For () FEI Number		Number Not Appli	icable () 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:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () D MCCORD, ROBE 2500 DEKALB PI NORRISTOWN, F	KE	Title: Name: Address: City-St-Zip:	C (X) Change () Addition ROSS, HOWARD 2500 DEKALB PIKE NORRISTOWN, PA 19401	
Title: Name: Address: City-St-Zip:	D () C WINTERS, GUY 2500 DEKALB PI NORRISTOWN, F		Title: Name: Address: City-St-Zip:	D (X) Change () Addition BOYLE, CHUCK 2500 DEKALB PIKE NORRISTOWN, PA 19401	
Title: Name: Address: City-St-Zip:	D () D DIPIANO, MIKE 2500 DEKALB PI NORRISTOWN, F		Title: Name: Address: City-St-Zip:	D (X) Change () Addition RUETER, DAVE 2500 DEKALB PIKE NORRISTOWN, PA 19401	
Title: Name: Address: City-St-Zip:	P () E FLYNN, JAMES 2500 DEKALB PI NORRISTOWN, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ()E HODGES, ROBEI 2500 DEKALB PI NORRISTOWN, F	KE	Title: Name: Address: City-St-Zip:	V (X) Change () Addition TOBIA, WILLIAM 2500 DEKALB PIKE NORRISTOWN, PA 19401	
Title: Name: Address: City-St-Zip:	S () E FOSTER, ERIC 2500 DEKALB PI NORRISTOWN, F		Title: Name: Address: City-St-Zip:	S (X) Change () Addition STOTTS, LISANNA 2500 DEKALB PIKE NORRISTOWN, PA 19401	

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: LISANNA STOTTS T 02/27/2006