2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004687

Entity Name: IMAGITAS, INC.

FILED Apr 25, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

48 WOERD AVENUE WALTHAM, MA 02453

Current Mailing Address: New Mailing Address:

ONE ELMCROFT RD.

C/O CORP. TAX MSC00-61-01
STAMFORD, CT 069260700

ONE ELMCROFT ROAD, MSC 61-01
STAMFORD, CT 06926 US

FEI Number: 31-1349889 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 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

OFFICERS AND DIRECTORS:

Title: SECY

Name: CORN, AMY C

Address: ONE ELMCROFT ROAD City-St-Zip: STAMFORD, CT 06926

Title: TREA

Name: SHAN, HELEN

Address: ONE ELMCROFT ROAD City-St-Zip: STAMFORD, CT 06926

Title: VP

Name: HOEY, RICHARD A
Address: ONE ELMCROFT ROAD
City-St-Zip: STAMFORD, CT 06926

Title: PRES

Name: STIMPSON, EDWARD K Address: ONE ELMCROFT RD City-St-Zip: STAMFORD, CT 069260700

Title: VP

 Name:
 JOHNSON, BARRET S

 Address:
 ONE ELMCROFT RD

 City-St-Zip:
 STAMFORD, CT 069260700

Title: DIR

 Name:
 MONAHAN, MICHAEL

 Address:
 ONE ELMCROFT ROAD

 City-St-Zip:
 STAMFORD, CT 06926 07

I hereby 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 all other like empowered.

SIGNATURE: BARRET S JOHNSON VP 04/25/2012