

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F07000002581

Entity Name: NEXANS INC.

FILED
Jul 14, 2009
Secretary of State

Current Principal Place of Business:

132 WHITE OAK RD
NEW HOLLAND, PA 17227 US

New Principal Place of Business:

Current Mailing Address:

132 WHITE OAK RD
NEW HOLLAND, PA 17227 US

New Mailing Address:

FEI Number: 23-3051465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: P () Delete
Name: KEVIN
Address: 132 WHITE OAK RD NEW HOLLAND PA 17227
City-St-Zip: NEW HOLLAND, PA 17557 US

Title: S () Delete
Name: FRANK
Address: 110 N CENTER ST - STE 204
City-St-Zip: HICKORY, NC 28601 US

Title: D () Delete
Name: PASCAL
Address: 16, RUE DE MONCEAU
City-St-Zip: PARIS, FRANCE, PA 75008 US

Title: V () Delete
Name: KEVIN
Address: 140 ALLSTATE PKWY L3R 0Z7
City-St-Zip: MARKHAM, ON, CAN, PA US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ST. CYR, KEVIN
Address: 132 WHITE OAK RD NEW HOLLAND PA 17227
City-St-Zip: NEW HOLLAND, PA 17557 US

Title: S (X) Change () Addition
Name: RYAN, FRANK
Address: 110 N CENTER ST - STE 204
City-St-Zip: HICKORY, NC 28601 US

Title: D (X) Change () Addition
Name: PORTEVIN, PASCAL
Address: 16, RUE DE MONCEAU
City-St-Zip: PARIS, FRANCE, PA 75008 US

Title: V (X) Change () Addition
Name: STINSON, KEVIN
Address: 140 ALLSTATE PKWY L3R 0Z7
City-St-Zip: MARKHAM, ON, CAN, PA US

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.

SIGNATURE: KEVIN ST. CYR

P

07/14/2009

Electronic Signature of Signing Officer or Director

Date