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 DIVISION OF CORPORATIONS

**C T CORPORATION SYSTEM**

**Requestor's Name**  
 660 East Jefferson Street

**Address**  
 Tallahassee, Florida 32301

**City State Zip Phone**  
 904-222-1092

**CORPORATION(S) NAME**

**500001516595**  
 -06/19/95--01019--034  
 \*\*\*\*\*70.00 \*\*\*\*\*70.00

*Andover Controls Corporation*

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| <input type="checkbox"/> NonProfit                 |   |   |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input checked="" type="checkbox"/> Foreign        |   |   |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of R.A.     |
| <input type="checkbox"/> Certified Copy            | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fictitious Name    |
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| <input type="checkbox"/> Call When Ready           | <input type="checkbox"/> Call if Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In        | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                  |   |   |

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**APPLICATION BY FOREIGN CORPORATION FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Andover Controls Corporation  
(Name of corporation: must include the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware  
(State or country under the law of which it is incorporated)

3. July 19, 1989 4. Perpetual  
(Date of Incorporation) (Duration)

5. 06-1274463  
(Federal Employer Identification number, if applicable)

6. Upon Qualification  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 300 Brickstone Square, Andover, Massachusetts 01810  
(Current mailing address)

8. To support a dealer network and to do sales presentation seminars.  
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and street addresses of officers and or directors:

**A. Directors:**

Chairman: See attached list of directors

Address: \_\_\_\_\_

Vice Chairman: See attached list of directors

Address: \_\_\_\_\_

Director: See attached list of directors

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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**B. Officers:**

President: See attached list of officers

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324

Zip Code

**11. Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

Registered agent's signature: \_\_\_\_\_

**CHARLES W. MEYER**

*Charles W. Meyer*

(Officer) **SPECIAL ASST. SECRETARY**

(Typed Name and Title of Officer)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

13. James E. Moroney  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. James E. Moroney, Vice President

(Name and capacity of person signing application)

**Andover Controls Corporation  
Directors & Officers List**

**Officers:**

President & Treasurer	William J. LaPointe
Vice President-Finance	James E. Moroney III
Vice President-Sales	Robert G. Klein
Vice President-Eng	Leonard R. Krasinski
Vice President-Systems	Steven Foy
Vice President-Operations	William R. Lynch

Business address for all of the above:

ACC  
300 Brickstone Square  
Andover MA 01810

**Directors:**

Peter Zinkin  
BICC plc  
Devonshire House  
Mayfair Place  
London UK W1X 5FH

William J. LaPointe  
ACC  
300 Brickstone Square  
Andover, MA 01810

James E. Moroney III  
ACC  
300 Brickstone Square  
Andover, MA 01810

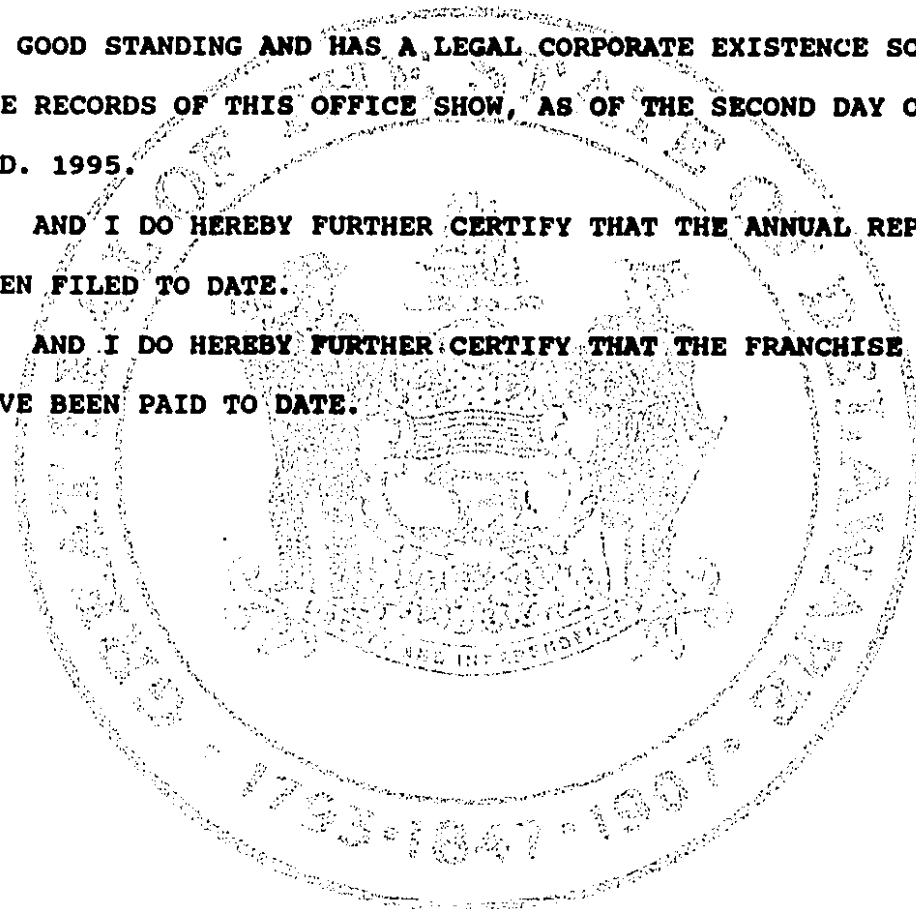
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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANDOVER CONTROLS CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF JUNE, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



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*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION:

DATE:

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