

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002382

FILED
Apr 06, 2005
Secretary of State

Entity Name: CURTISS-WRIGHT CONTROLS, INC.

Current Principal Place of Business:

3120 NW BLVD
GASTONIA, NC 28052

New Principal Place of Business:

Current Mailing Address:

3950 NW 28TH ST
MIAMI, FL 33142

New Mailing Address:

FEI Number: 22-2377871

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BENANTE, MARTIN R
Address: 4 BECKER FARM RD
City-St-Zip: ROSELAND, NJ 07068

Title: PD () Delete
Name: YOHRING, GEORGE J
Address: 3120 NORTHWEST BLVD
City-St-Zip: GASTONIA, NC 28052

Title: GVP () Delete
Name: ADAMS, DAVID C
Address: 3120 NORTHWEST BLVD.
City-St-Zip: GASTONIA, NC 28052

Title: S () Delete
Name: DENTON, MICHAEL J
Address: 4 BECKER FARM RD
City-St-Zip: ROSELAND, NJ 07068

Title: V (X) Delete
Name: TREFFINGER, MARK
Address: 201 OLD BOILING SPRINGS RD
City-St-Zip: SHELBY, NC 28152

Title: T () Delete
Name: TYNAN, GLENN E
Address: 4 BECKER FARM RD
City-St-Zip: ROSELAND, NJ 07068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT H. SHAW

AS

04/06/2005

Electronic Signature of Signing Officer or Director

Date