2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005 8:00 am
Secretary of State
02-01-2005 90027 036 ***150.00

DOCUMENT # F96000004511

1. Entity Name
THOMAS & BETTS CORPORATION

Principal Place of Business	Mailing Address
8155 T & B BLVD MEMPHIS, TN 38125	8155 T & B BLVD (48-37) MEMPHIS, TN 38125 US

JUUUUJUJ

01172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
22-1326940
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	PILEGGI, DOMINIC J
STREET ADDRESS	8155 T & B BLVD.
CITY-ST-ZIP	MEMPHIS, TN 38125
TITLE	T
NAME	OVIATT, THOMAS C
STREET ADDRESS	8155 T & B BLVD.
CITY-ST-ZIP	MEMPHIS, TN 38125
TITLE	S
NAME	RAINES, J.N.
STREET ADDRESS	8155 T B BLVD
CITY-ST-ZIP	MEMPHIS, TN 38125
TITLE	D
NAME	DREW, ERNEST H
STREET ADDRESS	8155 T B BLVD
CITY-ST-ZIP	MEMPHIS, TN 38125
TITLE	D
NAME	JERNIGAN, DEAN
STREET ADDRESS	8155 T B BLVD
CITY-ST-ZIP	MEMPHIS, TN 38125
TITLE	D
NAME	HAUSWALD, JEANNANE K
STREET ADDRESS	8155 & B BLVD
CITY-ST-ZIP	MEMPHIS, TN 38125

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ VP - TAX 1/25/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #