## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Mar 27, 2001 8:00 am Secretary of State DOCUMENT # F96000004794 SIGNAL TECHNOLOGY CORPORATION 03-27-2001 90020 005 \*\*\*150.00 Principal Place of Business Mailing Address 222 ROSEWOOD DR 222 ROSEWOOD DR DANVERS MA 01923-4510 DANVERS MA 01923-4510 O T O O O O 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 04-2758268 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **PCEO** TITLE ☐ Delete TITLE Change LOMBARD, GEORGE NAME NAME STREET ADDRESS 222 ROSEWOOD DR STREET ADDRESS CITY-ST-ZIP DANVERS MA 01923 CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE **NELSEN, ROBERT** NAME NAME 222 ROSEWOOD DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DANVERS MA 01923 ☐ Change Addition TITLE ☐ Delete TITLE PARKER, DAVID NAME NAME STREET ADDRESS 222 ROSEWOOD DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DANVERS MA 01923 TITLE ☐ Delete TITLE ☐ Change ☐ Addition FELDMAN, ROGER NAME NAME 150 FEDERAL ST % BINGHAM DANA STREET ADDRESS STREET ADDRESS: CITY-ST-ZIP C!TY-ST-ZIP BOSTON MA 02110-1726 ☐ Addition TITLE ☐ Delete TÍTLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

13. 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 11 or Block 12 if

3/a2/01 978-774-J-81

an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF ICER OR DIRECTOR

changed, or on an attachment with

SIGNATURE: