

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001287

FILED  
Mar 09, 2007  
Secretary of State

Entity Name: ELLIOTT POWER SYSTEMS, INC.

**Current Principal Place of Business:**

58 ELLIOTT POWER DRIVE  
LEXINGTON, TN 38351 US

**New Principal Place of Business:**

**Current Mailing Address:**

901 NORTH FOURTH STREET  
JEANNETTE, PA 15644 US

**New Mailing Address:**

FEI Number: 52-2068624      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: VP ( ) Delete  
Name: LORDI, MICHAEL T  
Address: 901 NORTH FOURTH ST  
City-St-Zip: JEANNETTE, PA 15644

Title: S ( ) Delete  
Name: COX, WILLIAM  
Address: 901 NORTH FOURTH STREET  
City-St-Zip: JEANNETTE, PA 15644

Title: P ( ) Delete  
Name: CASILLO, ANTONIO  
Address: 901 NORTH FOURTH ST.  
City-St-Zip: JEANNETTE, PA 15644

Title: T ( ) Delete  
Name: STEINMETZ, CHARLES T  
Address: 901 NORTH FOURTH ST.  
City-St-Zip: JEANNETTE, PA 15644

**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:

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 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: WILLIAM K COX

SEC

03/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date