

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002458

FILED
Jul 01, 2005
Secretary of State

Entity Name: ANO-COIL CORPORATION

Current Principal Place of Business:

60 E. MAIN ST.
P.O. BOX 1318
ROCKVILLE, CT 06066

New Principal Place of Business:

Current Mailing Address:

60 E. MAIN ST.
P.O. BOX 1318
ROCKVILLE, CT 06066

New Mailing Address:

FEI Number: 13-1669409

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: FROMSON, HOWARD A
Address: ONE GOLD ST.
City-St-Zip: HARTFORD, CT 06103

Title: DS () Delete
Name: DECOSTER, PAUL H
Address: 450 WEST END AVE.
City-St-Zip: NEW YORK, NY 10024

Title: V () Delete
Name: FROMSON, TIMOTHY A
Address: 469 EASTBURY HILL RD.
City-St-Zip: GLASTONBURY, CT 06033

Title: VCFO () Delete
Name: BUJESE, DAVID M
Address: 14 NOAH LANE
City-St-Zip: TOLLAND, CT 06084

Title: V () Delete
Name: KNORR, C.G. JR.
Address: 129 STONEPOST RD.
City-St-Zip: GLASTONBURY, CT 06033

Title: AS () Delete
Name: MICHAELS, JOSEPH IV
Address: 33 SURREY LANE
City-St-Zip: ROCKVILLE CENTRE, NY 11570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: FROMSON, HOWARD A
Address: ONE GOLD ST.
City-St-Zip: HARTFORD, CT 06103

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

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

Title: PRES (X) Change () Addition
Name: BUJESE, DAVID M
Address: 14 NOAH LANE
City-St-Zip: TOLLAND, CT 06084

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: DAVID M. BUJESE

PRES

07/01/2005

Electronic Signature of Signing Officer or Director

Date