

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002458

Entity Name: ANO-COIL CORPORATION

FILED  
Feb 25, 2009  
Secretary of State

## Current Principal Place of Business:

60 E. MAIN STREET  
ROCKVILLE, CT 06066

## New Principal Place of Business:

## Current Mailing Address:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) 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: PRES ( ) 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: ( ) 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:

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 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: DAVID M. BUJESE

PRES

02/25/2009

Electronic Signature of Signing Officer or Director

Date