2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005134

FILED Jan 14, 2005 Secretary of State

Entity Name: HAVERHILL CABLE AND MANUFACTURING CORPORATION

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
PO BOX 8222 181 FERRY RD. HAVERHILL, MA 018350722					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 8222 181 FERRY RD. HAVERHILL, MA 018350722					
FEI Number: (04-2854453	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
KNEELAND, FOSTER C 6530 NO. OCEAN BLVD. OCEAN RIDGE, FL 33435 US					
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:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CP () DO KNEELAND, THOM 181 FERRY ROAD HAVERHILL, MA (MAS C	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CST () DO CASEY, SANDRA 181 FERRY ROAD HAVERHILL, MA	A D	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DO KNEELAND, ELEA 6530 NO. OCEAN OCEAN RIDGE, F	NOR F BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () DO KNEELAND, DAVI 181 FERRY ROAD HAVERHILL, MA (D)	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DO RUMORE, SUSAN 181 FERRY ROAD HAVERHILL, MA)	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DO KNEELAND, FOST 6530 N OCEAN BI OCEAN RIDGE, F	ΓER LVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
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: SANDRA A. CASEY CST 01/14/2005