

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 12, 2000 8:00 am**  
**Secretary of State**

04-12-2000 90152 049 \*\*\*150.00

**DOCUMENT # F99000005768**

1. Entity Name  
**TURBINE AIRFOIL REFURBISHMENT SERVICES, INC.**  
*Pratt + Whitney Services, Inc.*

Principal Place of Business Mailing Address  
**ATTN: LEGAL DEPARTMENT** **ATTN: LEGAL DEPARTMENT**  
**400 EAST MAIN STREET** **400 EAST MAIN STREET**  
**EAST HARTFORD CT 06108** **EAST HARTFORD CT 06108-0968**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **06-1486258** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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]* DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>PURUSHOTAMAN, JOTHI</b>	
STREET ADDRESS	<b>400 MAIN STREET</b>	
CITY-ST-ZIP	<b>EAST HARTFORD CT 06108</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>WHITSTON, RICHARD M</b>	
STREET ADDRESS	<b>400 MAIN STREET</b>	
CITY-ST-ZIP	<b>EAST HARTFORD CT 06108</b>	
TITLE	<b>P</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>BARNHART, RICHARD R</b>	
STREET ADDRESS	<b>400 MAIN STREET</b>	
CITY-ST-ZIP	<b>EAST HARTFORD CT 06108</b>	
TITLE	<b>V</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>MONTANILE, WILLIAM D</b>	
STREET ADDRESS	<b>400 MAIN STREET</b>	
CITY-ST-ZIP	<b>EAST HARTFORD CT 06108</b>	
TITLE	<b>V</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>MADDY, KEVIN S</b>	
STREET ADDRESS	<b>400 MAIN STREET</b>	
CITY-ST-ZIP	<b>EAST HARTFORD CT 06108</b>	
TITLE	<b>V</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>KLINGLER, JAMES</b>	
STREET ADDRESS	<b>3101 HAMMON ROAD</b>	
CITY-ST-ZIP	<b>WICHITA FALLS TX 76310</b>	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SEE ATTACHED LIST</b>	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*March 6, 2000*  
 Date Daytime Phone #

19900005768

00059402

**D**

**Jothi Purushotaman  
400 Main Street  
East Hartford, CT 06108**

**D**

**Chester Paul Beach, Jr.  
400 Main Street  
East Hartford, CT 06108**

**P**

**Gerald R. Kent, Jr.  
400 Main Street  
East Hartford, CT 06108**

**D/VP**

**Robert B. Weiner  
400 Main Street  
East Hartford, CT 06108**

**VP**

**Kevin G. Krause  
1170 111<sup>th</sup> Street  
Grand Praire TX 75050**

**VP**

**Joseph S. Kern  
3101 Hammon Road  
Wichita Falls, TX**

**VP**

**Larry L. McDougall  
2201 E.L. Anderson Boulevard  
Claremore, Ok 74017**

**VP**

**Patrick Dempsey  
Avenue E East  
Arlington, TX**

**VP**

**Edmund DiSanto  
400 Main Street  
East Hartford, CT 06108**

**VP**

**Paul S. Uccello  
400 Main Street  
East Hartford, CT 06108**

**S**

**Stephen B. Swigert  
400 Main Street  
East Hartford, CT 06108**

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B0059402

AS

Marlene C. Hayes  
400 Main Street  
East Hartford, CT 06108

AS

Michael J. Funk  
1525 Midway Park Road  
Bridgeport, West Virginia 26330

AS

Chester Malinowski, Jr.  
Pearl Street  
Hartford, CT 06101

AS

Edward R. Gailing  
Pearl Street  
Hartford, CT 06101

T

Michael J. Zapatka  
415 Washington Avenue  
North Haven, CT 06473