2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008
Secretary of State

DOCUMENT# G13216

Entity Name: EG&G FLORIDA, INC.

Current Principal Place of Business:

45 WILLIAM STREET
WELLESLEY, MA 024511457 US

New Principal Place of Business:

940 WINTER STREET
WALTHAM, MA 02451 US

Current Mailing Address:

45 WILLIAM STREET
ATTN: J. PEARL
WELLESLEY, MA 024511457 US

New Mailing Address:

940 WINTER STREET
ATTN: J. PEARL
WALTHAM, MA 02451 US

FEI Number: 59-2247761 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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: DSP ( ) Delete
Name: HEALY, JOHN L
Address: 940 WINTER STREET, RESERVOIR WOODS
City-St-Zip: WALTHAM, MA 024511457 US

Title: T ( ) Delete
Name: FRIEL, ROBERT F
Address: 940 WINTER STREET, RESERVOIR WOODS
City-St-Zip: WALTHAM, MA 024511457 US

Title: DVP ( ) Delete
Name: O'HARA, KATHERINE A
Address: 940 WINTER STREET, RESERVOIR WOODS
City-St-Zip: WALTHAM, MA 024511457 US

Title: D (X) Delete
Name: CAPELLO, JEFFREY D
Address: 940 WINTER STREET, RESERVOIR WOODS
City-St-Zip: WALTHAM, MA 024511457 US

Title: VP ( ) Delete
Name: SCHLEPER, EDWARD R
Address: 940 WINTER STREET, RESERVOIR WOODS
City-St-Zip: WALTHAM, MA 024511457 MA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change ( ) Addition
Name: DELAHUNT, STEVEN J
Address: 940 WINTER STREET, RESERVOIR WOODS
City-St-Zip: WALTHAM, MA 024511457 US

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: JOHN L. HEALY DSP 03/10/2008

Electronic Signature of Signing Officer or Director — Date