

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000463

Entity Name: GULF CONTROLS COMPANY, LLC

FILED
Apr 26, 2009
Secretary of State

Current Principal Place of Business:

5201 TAMPA WEST BOULEVARD
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

5201 TAMPA WEST BOULEVARD
TAMPA, FL 33634

New Mailing Address:

P O BOX 15100
TAMPA, FL 33684

FEI Number: 51-0405877

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCCARTHY, DENIS
Address: 330 GRANT STREET SUITE 1212
City-St-Zip: PITTSBURGH, PA 15219

Title: MGR () Delete
Name: FLIEMAN, JOHN III
Address: 5201 TAMPA WEST BOULEVARD
City-St-Zip: TAMPA, FL 33634

Title: MGR () Delete
Name: AYRES, RUSSELL W
Address: 1900 GRANT BUILDING
City-St-Zip: PITTSBURGH, PA 15219

Title: MGR (X) Delete
Name: HARRIS, CHRISTOPHER
Address: 330 GRANT STREET SUITE 1212
City-St-Zip: PITTSBURGH, PA 15219

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: POLJAK, MARK P
Address: 330 GRANT STREET SUITE 2000
City-St-Zip: PITTSBURGH, PA 15219

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN FLIEMAN III

MGR

04/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date