

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12729

FILED
Apr 30, 2009
Secretary of State

Entity Name: WES-GARDE COMPONENTS GROUP, INC.

Current Principal Place of Business:

190 ELLIOTT STREET
HARTFORD, CT 06114

New Principal Place of Business:

Current Mailing Address:

190 ELLIOTT STREET
HARTFORD, CT 06114

New Mailing Address:

FEI Number: 06-0948291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, FRANCES MANAGER
2820 DRANE FIELD ROAD
LAKELAND, FL 33811 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: VP () Delete
Name: LEMANSKI, JOSEPH
Address: 190 ELLIOTT STREET
City-St-Zip: HARTFORD, CT 06114

Title: VP () Delete
Name: GALLARY, JOHN
Address: 190 ELLIOTT ST.
City-St-Zip: HARTFORD, CT

Title: VP () Delete
Name: SORENSON, JR., ROBERT C
Address: 190 ELLIOTT STREET
City-St-Zip: HARTFORD, CT 06114

Title: P () Delete
Name: SORENSON, SR., ROBERT C
Address: 190 ELLIOTT STREET
City-St-Zip: HARTFORD, CT 06114

Title: VP () Delete
Name: SORENSON, WESLEY
Address: 190 ELLIOTT STREET
City-St-Zip: HARTFORD, CT 06114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: EX V (X) Change () Addition
Name: GALLARY, JOHN
Address: 190 ELLIOTT ST.
City-St-Zip: HARTFORD, CT

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 D. GALLARY

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date