

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15450

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: RESOURCES MANAGEMENT CORP.

## Current Principal Place of Business:

TWO BATTERSON PARK ROAD  
FARMINGTON, CT 06032

## New Principal Place of Business:

## Current Mailing Address:

TWO BATTERSON PARK ROAD  
FARMINGTON, CT 06032

## New Mailing Address:

FEI Number: 06-0944880

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: CTD ( ) Delete  
Name: LOEHMANN, FRANK M., JR.  
Address: 130 NOB HILL ROAD  
City-St-Zip: CHESHIRE, CT 06410

Title: D ( ) Delete  
Name: JOHNSON, SANDRA S  
Address: 104 BRUSH HILL RD  
City-St-Zip: LYME, CT 06471

Title: VD ( ) Delete  
Name: FLAMIO, DONNA B.,  
Address: 34 FAIRVIEW DRIVE  
City-St-Zip: FARMINGTON, CT 06032

Title: D ( ) Delete  
Name: OWSIANIK, LINDA R  
Address: 128 HILL ST  
City-St-Zip: MERIDEN, CT 06450

Title: V ( ) Delete  
Name: FULLER, THOMAS P  
Address: 195 MOUNTAIN RD  
City-St-Zip: N. GRANBY, CT 06060

Title: PD ( ) Delete  
Name: HERLIHY, MICHAEL W  
Address: 20 MOUNTAIN BROOK DR  
City-St-Zip: CHESHIRE, CT 06410

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LINDA R. OWSIANIK

D

01/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date