

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 21, 1999 8:00 am  
Secretary of State

02-21-1999 90051 012 \*\*\*150.00

DOCUMENT # P15520

1. Corporation Name  
CARLETON TECHNOLOGIES, INC.

Principal Place of Business  
3910 RIGA BLVD.  
SABAL INDUSTRIAL PARK  
TAMPA FL 33619

Mailing Address  
10 COBHAM DRIVE  
ORCHARD PARK NY 14127  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/10/1987

4. FEI Number

16-1303637

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
	D PAGE, GORDON		
STREET ADDRESS	COBHAM PLC, BROOK ROAD/WIMBORNE, DORSET	1.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLAND BH21 2BJ	1.4 CITY-ST-ZIP	
TITLE	CPD	2.1 TITLE	
NAME	CAWDERY, PADRAIG H	2.2 NAME	
STREET ADDRESS	10 COBHAM DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORCHARD PARK NY 14127	2.4 CITY-ST-ZIP	
TITLE	VTD	3.1 TITLE	SD
NAME	VOGEL, D. P.	3.2 NAME	GRABON, JOHN
STREET ADDRESS	10 COBHAM DRIVE	3.3 STREET ADDRESS	10 COBHAM DRIVE
CITY-ST-ZIP	ORCHARD PARK NY 14127	3.4 CITY-ST-ZIP	ORCHARD PARK, NY 14127
TITLE	D	4.1 TITLE	D
NAME	BUCK, JOHN T	4.2 NAME	MCCANN, EDWARD
STREET ADDRESS	10 COBHAM DR	4.3 STREET ADDRESS	293 BOSTON POST ROAD
CITY-ST-ZIP	ORCHARD PARK NY 14127	4.4 CITY-ST-ZIP	WESTON, MA 02493
TITLE	D	5.1 TITLE	D
NAME	YARBOROUGH, WILLIAM G	5.2 NAME	YARBOROUGH, WILLIAM G.
STREET ADDRESS	10 COBHAM DR	5.3 STREET ADDRESS	ALLIED RESEARCH CORP., 8000 TOWERS
CITY-ST-ZIP	ORCHARD PARK NY 14127	5.4 CITY-ST-ZIP	CRESCENT DR., VIENNA, VA 22182
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

4. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Padraig H. Cawdery*  
Padraig H. Cawdery  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/99

Date

716-667-6200

Daytime Phone #

CR2E034 (1/98)