

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15520

Entity Name: CARLETON TECHNOLOGIES, INC.

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

3018 US HWY 301 N
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

10 COBHAM DRIVE
ORCHARD PARK, NY 14127 US

New Mailing Address:

FEI Number: 16-1303637

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: CPD () Delete
Name: COFFIELD, KELLY
Address: 2734 HICKORY GROVE ROAD
City-St-Zip: DAVENPORT, IA 52804

Title: SD () Delete
Name: ARMENAT, F E
Address: 10 COBHAM DR
City-St-Zip: ORCHARD PARK, NY 14127

Title: D () Delete
Name: ZIGEL, JAMES M
Address: 2107 COTTON VALLEY ST
City-St-Zip: HENDERSON, NV 89052

Title: D () Delete
Name: YARBOROUGH, WILLIAM G
Address: 6800 FLEETWOOD RD., STE 1019
City-St-Zip: MC LEAN, VA 22101

Title: D () Delete
Name: STEVENS, ANDREW J
Address: COBHAM PLC BROOK RD
City-St-Zip: WIMBORNE, DORSET, UK BH21-2BJ

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: COFFIELD, KELLY
Address: 2734 HICKORY GROVE ROAD
City-St-Zip: DAVENPORT, IA 52804

Title: S (X) Change () Addition
Name: KOTA, KEN
Address: 10 COBHAM DR
City-St-Zip: ORCHARD PARK, NY 14127

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

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

Title: D (X) Change () Addition
Name: STEVENS, ANDREW J
Address: 10 COBHAM DRIVE
City-St-Zip: ORCHARD PARK, NY 14127

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: ANDREW STEVENS

D

04/16/2008

Electronic Signature of Signing Officer or Director

Date