## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P16009

FILED Mar 24, 2009 Secretary of State

Entity Name: AMERICAN INSULATED WIRE CORPORATION

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
260 FORBI MANSFIEL	ES BLVD .D, MA 02048	US				
Current Mailing Address:			New Mailing Address:			
260 FORBES BLVD MANSFIELD, MA 02048 US						
FEI Number: 05-0097940		FEI Number Applied For ( )	For ( ) FEI Number Not Applicable ( )		Certificate of Status Desired ( )	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of	New Registered Agent:	
1200 S. PIN PLANTATIO	DRATION SYST NE ISLAND RO ON, FL 33324	AD US	nurnace of changing i	to registered :	office or registered agent or bo	
	of Florida.	abilitis triis statement for the p	ourpose of changing i	is registered (	office or registered agent, or bo	
SIGNATUF	RE:					
	Electronic	c Signature of Registered Age	ent		Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PRES () I WHEELER, ROB 260 FORBES BL MANSFIELD, MA	VD	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CFO ()[ DEBIASI, RALPH 59-25 LITTLE NE LITTLE NECK, N	ECK PKWY	Title: Name: Address: City-St-Zip:	CFO (X BAYDARIAN, M 59-25 LITTLE LITTLE NECK,	NECK PKWY	
Title: Name: Address: City-St-Zip:	SEC () I SOKOLOW, STE 59-25 LITTLE NE LITTLE NECK, N	ECK PKWY	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name:	CEO ()[ LEVITON, HARO	Delete I D	Title: Name:	CEO (X	() Change()Addition	

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: MARK R. BACON VP 03/24/2009