

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90427 006 ***150.00

DOCUMENT # P22578

1. Entity Name

TYCO VALVES & CONTROLS, INC.

Principal Place of Business

9600 WEST GULF BANK DRIVE
 HOUSTON TX 77040

Mailing Address

ONE TOWN CENTER ROAD
 BOCA RATON FL 33486-1002
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. **TYCO INTERNATIONAL (US) INC.**
ONE TOWN CENTER ROAD
P.O. BOX 5035
BOCA RATON, FL 33431-0835

City & State

City & State

4. FEI Number

74-2013117

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	MEAD, ROBERT	
STREET ADDRESS	3 TYCO PARK	
CITY-ST-ZIP	EXETER NH 03833	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	DOHERTY, BERNARD	
STREET ADDRESS	1 TYCO PARK	
CITY-ST-ZIP	EXETER NH 03833	
TITLE	D	<input type="checkbox"/> Delete
NAME	KOZLOWSKI, DENNIS L	
STREET ADDRESS	1 TYCO PARK	
CITY-ST-ZIP	EXETER NH 03833	
TITLE	D	<input type="checkbox"/> Delete
NAME	SWARTZ, MARK	
STREET ADDRESS	1 TYCO PARK	
CITY-ST-ZIP	EXETER NH 03833	
TITLE	D	<input type="checkbox"/> Delete
NAME	GUTIN, IRVIN	
STREET ADDRESS	1 TYCO PARK	
CITY-ST-ZIP	EXETER NH 03833	
TITLE	AT	<input checked="" type="checkbox"/> Delete
NAME	LOMBARDOZZI, BRENDA	
STREET ADDRESS	1 TYCO PARK	
CITY-ST-ZIP	EXETER NH 03833	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP/Asst Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Scott Stevenson	
STREET ADDRESS	One Town Center Rd	
CITY-ST-ZIP	Boca Raton Fl 33486	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Scott Stevenson
 Vice President/Asst. Treasurer

Date

Daytime Phone #

4/25/00 (561) 988-7823

CR2E034 (9/99)