

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22578

FILED  
Apr 15, 2004  
Secretary of State

Entity Name: TYCO VALVES & CONTROLS, INC.

**Current Principal Place of Business:**

9700 WEST GULF BANK ROAD  
HOUSTON, TX 77040

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3088  
BOCA RATON, FL 334313088 US

**New Mailing Address:**

PO BOX 8749  
PRINCETON, NJ 08543 US

FEI Number: 74-2013117

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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: PD ( ) Delete  
Name: MEAD, ROBERT P  
Address: 272 CORPORATE DR. SUITE 100  
City-St-Zip: PORTSMOUTH, NH 03801

Title: VP ( ) Delete  
Name: MOROZE, BRIAN  
Address: 273 CORPORATE DR. SUITE 100  
City-St-Zip: PORTSMOUTH, NH 03801

Title: V ( ) Delete  
Name: FOLEY, MARK D  
Address: ONE TOWN CENTER ROAD  
City-St-Zip: BOCA RATON, FL 33486

Title: D (X) Delete  
Name: GUTIN, IRVIN  
Address: 1 TYCO PARK  
City-St-Zip: EXETER, NH 03833

Title: ATVP (X) Delete  
Name: STEVENSON, SCOTT  
Address: ONE TOWN CENTER ROAD  
City-St-Zip: BOCA RATON, FL 33486

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MEAD, ROBERT P  
Address: 9700 WEST GULF BANK ROAD  
City-St-Zip: HOUSTON, TX 77040

Title: S (X) Change ( ) Addition  
Name: STAFFORD, RYAN K  
Address: 9700 WEST GULF BANK ROAD  
City-St-Zip: HOUSTON, TX 77040

Title: T (X) Change ( ) Addition  
Name: HUND-MEJEAN, MARTINA  
Address: 9700 WEST GULF BANK ROAD  
City-St-Zip: HOUSTON, TX 77040

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 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 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: ROBERT PETER MEAD

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04/15/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date