

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90026 008 ***150.00

DOCUMENT # P31519

1. Entity Name
PREFCO VI INC.



Principal Place of Business

27 WATERVIEW DR
201 MERRITT SEVEN
SHELTON, CT 06484 US

Mailing Address

27 WATERVIEW DR
201 MERRITT SEVEN
SHELTON, CT 06484 US

20007169

2. Principal Place of Business - No P.O. Box #

3 Corporate Drive
Suite, Apt. #, etc.
Suite 300

3. Mailing Address

3 Corporate Drive
Suite, Apt. #, etc.
Suite 300



02262007 Chg-P CR2E034 (12/06)

City & State

SHELTON, CT

Zip

06484-6222

Country

USA

City & State

SHELTON, CT

Zip

06484-6222

Country

USA

4. FEI Number

06-1305648

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

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

(NOTE: Registered Agent signature required when instituting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME KLEIMAN, DAVID
STREET ADDRESS 1 ELMCROFT RD
CITY-ST-ZIP STAMFORD, CT 06926 ☒ Delete

TITLE T
NAME HELEN, SHAN
STREET ADDRESS 1 ELMCROFT RD
CITY-ST-ZIP STAMFORD, CT 06926 ☒ Delete

TITLE DP
NAME WILLIAMSON, KEITH
STREET ADDRESS 27 WATERVIEW DRIVE
CITY-ST-ZIP SOUTHTON, CT 06489 ☒ Delete

TITLE AS
NAME SEIDEMON, MICHELLE COHN
STREET ADDRESS 27 WATERVIEW DR
CITY-ST-ZIP SHELTON, CT 06484 ☒ Delete

TITLE AS
NAME WALCOTT, JOHN
STREET ADDRESS 27 WATERVIEW DR
CITY-ST-ZIP SHELTON, CT 06484 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Director
NAME W. Brett Ingersoll
STREET ADDRESS 299 PARK Ave. FL 21-23
CITY-ST-ZIP New York, NY 10171 ☒ Change ☐ Addition

TITLE President
NAME Lawrence D. Osmonski
STREET ADDRESS 3 Corporate Drive, Ste 300
CITY-ST-ZIP Shelton, CT 06484-6222 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAWRENCE D. OSMONSKI Pres. Snt

Date

3/1/07

Daytime Phone #

203-925-2000