2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34633

Entity Name: ANDLINGER PROPERTIES CAPITAL CORP.

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

660 BEACHLAND BLVD 5070 HIGHWAY A1A

SUITE 202 SUITE 221

VERO BEACH, FL 32963 US VERO BEACH, FL 32963 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1730 P.O. BOX 1730

#235 VERO BEACH, FL 32961 US

#230 VERO BEACH, FL 32961 US

FEI Number: 51-0334868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MITCHELL, IVAR W
660 BEACHLAND BVLD
5070 HIGHWAY A1A
SUITE 202
SUITE 221

VERO BEACH, FL 32963 US VERO BEACH, FL 32963 US

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: 01/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: ANDLINGEL, GERHARD R Name: ANDLINGER, GERHARD R

Name:ANDLINGEL, GERHARD RName:ANDLINGER, GERHARD RAddress:3240 SAVANNAH PLAddress:3240 SAVANNAH PLCity-St-Zip:VERO BEACH, FL 32963City-St-Zip:VERO BEACH, FL 32963

Title: VT () Delete Title: () Change () Addition

 Name:
 RUSSELL, JAMES R.,
 Name:

 Address:
 303 SOUTH BROADWAY
 Address:

 City-St-Zip:
 TARRYTOWN, NY
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 MAGIDA, STEPHEN A.,
 Name:

 Address:
 303 SOUTH BROADWAY
 Address:

 City-St-Zip:
 TARRYTOWN, NY
 City-St-Zip:

Title: () Delete Title: (X) Change () Addition MITCHELL, IVAR W MITCHELL, IVAR W Name: Name: Address: 660 BEACHLAND BLVD #202 Address: 5070 HIGHWAY A1A - SUITE 221 City-St-Zip: VERO BCH., FL 32963 City-St-Zip: VERO BEACH, FL 32963

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: IVAR W. MITCHELL PRES 01/21/2009