

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90060 004 ***150.00

DOCUMENT # P37767

1. Corporation Name

COBURN OPTICAL INDUSTRIES, INC.



Principal Place of Business

4606 S. GARNETT RD.
STE. #200
TULSA OK 74146-5250
US

Mailing Address

4606 S. GARNETT RD.
STE. #200
TULSA OK 74146-5250
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/05/1992

4. FEI Number

58-1977404

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 55 Gerber Road

Suite, Apt. #, etc.

22

City & State

23 South Windsor, CT

Zip Country

24 06074 25 Tolland

2a. Mailing Address

26 55 Gerber Road

Suite, Apt. #, etc.

27

City & State

28 South Windsor, CT

Zip Country

29 06074 30 Tolland

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **CD** ☒ DELETE

NAME **JEPSON, ROBERT E**
STREET ADDRESS **8 SHELLWORTH CROSSESSING**
CITY-ST-ZIP **SAVANNAH GA 31411**

TITLE **P** ☒ DELETE

NAME **BLOCHA, JOHN**
STREET ADDRESS **10305 S. 69TH EAST AVE.**
CITY-ST-ZIP **TULSA OK**

TITLE **VTAS** ☒ DELETE

NAME **PASCO, ROBERT J**
STREET ADDRESS **3442 E. 87TH ST.**
CITY-ST-ZIP **TULSA OK**

TITLE **S** ☒ DELETE

NAME **LANDSMAN, STEPHEN A.**
STREET ADDRESS **161 CHICAGO AVE.**
CITY-ST-ZIP **CHICAGO IL 60611**

TITLE **AS** ☒ DELETE

NAME **LANGAN, JOSEPHINE**
STREET ADDRESS **2 HAZEL GLEN LANE**
CITY-ST-ZIP **SAVANNAH GA 31411**

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President/Director** ☐ Change ☒ Addition

1.2 NAME **Shawn Harrington**
1.3 STREET ADDRESS **76 Sunset Ridge Road**
1.4 CITY-ST-ZIP **Rocky Hill, CT 06067**

2.1 TITLE **Secretary** ☐ Change ☒ Addition

2.2 NAME **Richard F. Treacy, Jr.**
2.3 STREET ADDRESS **12 Partridge Landing**
2.4 CITY-ST-ZIP **Glastenbury, CT 06033**

3.1 TITLE **Treasurer/Director** ☐ Change ☒ Addition

3.2 NAME **Gary K. Bennett**
3.3 STREET ADDRESS **108 Tri Mountain Road**
3.4 CITY-ST-ZIP **Durham, CT 06422**

4.1 TITLE **Director** ☐ Change ☒ Addition

4.2 NAME **Michael J. Cheshire**
4.3 STREET ADDRESS **164 Main Street**
4.4 CITY-ST-ZIP **Farmington, CT 06032**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

SIGNATURE:

John R. Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/99
Date

(860)648-6767
Daytime Phone #

CR2E034 (11/98)