

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40308

FILED  
May 12, 2012  
Secretary of State

**Entity Name:** COOPER & CO., INC.

**Current Principal Place of Business:**

10179 COMMERCE PARK DR  
CINCINNATI, OH 45246 US

**New Principal Place of Business:**

**Current Mailing Address:**

10179 COMMERCE PARK DRIVE  
CINCINNATI, OH 45246 US

**New Mailing Address:**

**FEI Number:** 31-0622081

**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 RD.  
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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: COOPER, DAVID S PRES  
Address: 10179 COMMERCE PARK DR  
City-St-Zip: CINCINNATI, OH 45246

Title: DP  
Name: COOPER, MARTIN R PRES  
Address: 10179 COMMERCE PARK DR  
City-St-Zip: CINCINNATI, OH 45246

Title: T  
Name: GRIFFITHS, DAVID M TREAS  
Address: 10179 COMMERCE PARK DRIVE  
City-St-Zip: CINCINNATI, OH

Title: VP  
Name: GEORGE, CINDY S VP  
Address: 10179 COMMERCE PARK DR  
City-St-Zip: CINCINNATI, OH

I hereby 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 all other like empowered.

SIGNATURE: DAVID M GRIFFITHS

TREA

05/12/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date