

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000006750

**FILED**  
**Apr 18, 2014**  
**Secretary of State**  
**CC5597283376**

**Entity Name:** EYP/AE INCORPORATED

**Current Principal Place of Business:**

NANOFAB EAST, 257 FULLER RD  
1ST FLOOR  
ALBANY, NY 12203

**Current Mailing Address:**

NANOFAB EAST, 257 FULLER RD  
1ST FLOOR  
ALBANY, NY 12203

**FEI Number:** 20-0976565

**Certificate of Status Desired:** No

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DR STE A  
TALLAHASSEE, FL 32301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           PTD  
Name           BIRDSEY, TOM D  
Address        NANOFAB EAST, 257 FULLER RD -  
                  1ST FLOOR  
City-State-Zip: ALBANY NY 12203

Title           V  
Name           HALLORAN-LANCASTER, FRANKLIN D  
Address        3504 LAKE LYNDA DR. STE 114  
City-State-Zip: ORLANDO FL 32817-8459

Title           D  
Name           KAMAL, LEILA  
Address        470 ATLANTIC AVE, FL 7  
City-State-Zip: BOSTON MA 02210

Title           D  
Name           KIRBY, CHARLES J  
Address        1000 POTOMAC ST. NW  
City-State-Zip: WASHINGTON DC 20007

Title           SECRETARY  
Name           KEMPF, JOHN S  
Address        NANOFAB EAST, 257 FULLER RD  
                  1ST FLOOR  
City-State-Zip: ALBANY NY 12203

Title           DIRECTOR  
Name           OTTAVIO, PETER D  
Address        NANOFAB EAST, 257 FULLER RD  
                  1ST FLOOR  
City-State-Zip: ALBANY NY 12203

*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:** JOHN S. KEMPF

**SECRETARY**

**04/18/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date