

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842084

FILED
Jan 04, 2005
Secretary of State

Entity Name: LAB-VOLT SYSTEMS, INC.

Current Principal Place of Business:

STATE HIGHWAY 34
P.O. BOX 686
FARMINGDALE, NJ 07727

New Principal Place of Business:

Current Mailing Address:

STATE HIGHWAY 34, ATTN: CHARLES H. BOND
P.O. BOX 686
FARMINGDALE, NJ 07727

New Mailing Address:

FEI Number: 21-0415841 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SAVINELLI, EMILIO A
Address: 24 MOLLBROOK DR
City-St-Zip: WILTON, CT

Title: OD () Delete
Name: SCHLUTER, PETER M
Address: 4 QUAKER LANE
City-St-Zip: LITTLE SILVER, NJ

Title: D () Delete
Name: WIAINT, DAVID B.
Address: 69 LEIGH STREET
City-St-Zip: CLINTON, NJ 08809

Title: D () Delete
Name: GREENE, JAMES R
Address: 134 BUTTONWOOD DR.
City-St-Zip: FAIR HAVEN, NJ

Title: D () Delete
Name: VACCARO, JAMES S III
Address: 613 N EDGEMERE DR
City-St-Zip: WEST ALLENHURST, NJ 07711

Title: D () Delete
Name: HUNTER, GARRETT B
Address: 150 TAMARACK DRIVE
City-St-Zip: E. GREENWICH, RI 02818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: OD (X) Change () Addition
Name: BOND, CHARLES H
Address: 282 DIVISION AVENUE
City-St-Zip: BELLEVILLE, NJ 07109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES H. BOND

SVP

01/04/2005

Electronic Signature of Signing Officer or Director

_____ Date