## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 842084** 

Entity Name: LAB-VOLT SYSTEMS, INC.

FILED Jan 07, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1710 STATE HIGHWAY 34 ATTN: CHARLES H. BOND FARMINGDALE, NJ 07727

Current Mailing Address: New Mailing Address:

P.O. BOX 686 PO BOX 686

ATTN: CHARLES H. BOND FARMINGDALE, NJ 07727 FARMINGDALE, NJ 07727

FEI Number: 21-0415841 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:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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

## **OFFICERS AND DIRECTORS:**

Title:

Name: SAVINELLI, EMILIO A Address: 24 MOLLBROOK DR City-St-Zip: WILTON, CT 06897 US

Title: OD

Name: SCHLUTER, PETER M Address: 4455 GULF PINES DRIVE City-St-Zip: SANIBEL, FL 33957 US

Title: D

 Name:
 GREENE, JAMES R

 Address:
 134 BUTTONWOOD DR.

 City-St-Zip:
 FAIR HAVEN, NJ 07704 US

Title: OD

Name: BOND, CHARLES H

Address: 46-41 BLOOMINGDALE DRIVE City-St-Zip: HILLSBOROUGH, NJ 08844

Title: [

 Name:
 HUNTER, GARRETT B

 Address:
 150 TAMARACK DRIVE

 City-St-Zip:
 E. GREENWICH, RI 02818 US

Title: D

Name: KETTEMAN, CHARLES H Address: 2343 WULFERT ROAD

City-St-Zip: SANIBEL ISLAND, FL 33957 US

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: CHARLES H. BOND SVP 01/07/2012