

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002288

FILED  
Jun 24, 2009  
Secretary of State

Entity Name: GATSO USA, INC.

**Current Principal Place of Business:**

36 MONUMENT ST.  
WENHAM, MA 01984

**New Principal Place of Business:**

900 CUMMINGS CENTER  
321-U  
BEVERLY, MA 01915

**Current Mailing Address:**

36 MONUMENT ST.  
WENHAM, MA 01984

**New Mailing Address:**

900 CUMMINGS CENTER  
321-U  
BEVERLY, MA 01915

FEI Number: 75-3249780

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: NOBLE, ANDREW  
Address: 36 MONUMENT ST.  
City-St-Zip: WENHAM, MA 01984

Title: C ( ) Delete  
Name: GATSONIDES, NIKI T  
Address: CLAES TILLYWEG 2  
City-St-Zip: NL-2031CW HAARLEM.THE NETHER,

Title: D ( ) Delete  
Name: GATSONIDES, TIMO PATRICK J  
Address: CLAES TILLYWEG 2  
City-St-Zip: NL-2031CW HAARLEM.THE NETHER,

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: S ( ) Change (X) Addition  
Name: KOSINA, RICHARD  
Address: 11045 E. RAIN TREE DR.  
City-St-Zip: SCOTTSDALE, AZ 85259

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANDREW NOBLE

MR

06/24/2009

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

\_\_\_\_\_  
Date