# 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005006

Entity Name: M.G.S. MANUFACTURING INC.

## **Current Principal Place of Business:**

122 OTIS STREET ROME, NY 13441

### **Current Mailing Address:**

POST OFFICE BOX 4259 ROME, NY 13442-4259

# FEI Number: 16-0962284

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US Certificate of Status Desired: No

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

### **Officer/Director Detail :**

Title	PCEO	Title	D
Name	JOHNSON, ROBERT D	Name	JOHNSON, ROBERT D
Address	20 MARINER BEACH LANE	Address	20 MARINER BEACH LANE
City-State-Zip:	VERO BEACH FL 32963	City-State-Zip:	VERO BEACH FL 32963
Title	VCOO	Title	ASD
Name	STEPHAN, SCOTT W	Name	STEPHAN, SCOTT W
Address	122 OTIS STREET	Address	122 OTIS STREET
City-State-Zip:	ROME NY 13441	City-State-Zip:	ROME NY 13441
Title	STD	Title	VP
Title Name	STD GROW, DAVID C	Title Name	VP ZAMPOGNA, JAMES L
	-		
Name	GROW, DAVID C	Name	ZAMPOGNA, JAMES L 122 OTIS STREET
Name Address City-State-Zip:	GROW, DAVID C 301 N. WASHINGTON STREET ROME NY 13440	Name Address	ZAMPOGNA, JAMES L 122 OTIS STREET
Name Address City-State-Zip: Title	GROW, DAVID C 301 N. WASHINGTON STREET ROME NY 13440 VP	Name Address City-State-Zip:	ZAMPOGNA, JAMES L 122 OTIS STREET ROME NY 13441
Name Address City-State-Zip: Title Name	GROW, DAVID C 301 N. WASHINGTON STREET ROME NY 13440 VP MCCOMISKEY, THOMAS J	Name Address City-State-Zip: Title	ZAMPOGNA, JAMES L 122 OTIS STREET ROME NY 13441 VP
Name Address City-State-Zip: Title	GROW, DAVID C 301 N. WASHINGTON STREET ROME NY 13440 VP MCCOMISKEY, THOMAS J 122 OTIS STREET	Name Address City-State-Zip: Title Name	ZAMPOGNA, JAMES L 122 OTIS STREET ROME NY 13441 VP JOHNSON, BRIAN P

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: SCOTT W. STEPHAN

VP & C.O.O.

02/21/2015 Date

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Feb 21, 2015 Secretary of State CC9475853508