

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Form 630 12/01

PROFIT CORPO	RATION AN	NNUAL REP	ORT FOR THE YE	AR 2005	
(FORM MUST BE TYPED IN B	March I ● Filin LACK)	g Fee: \$50.00			-
I. Corporaie ID No. *83495*	2. Name of Corporation PRINCETON IN	on NNOVATIONS, INC	> .	-	
3. Street Address Principal Busin 4301 RIVERVIEW BL	ess Office		City BRADENTON	State FL	Zip
4. Business Phone No. 9417440355		5. State of Incorporation RHODE ISLANI	on .	- -	34209 - 6. SIC Code
7. Brief Description of the Chara TO INVENT, DEVELOP,	cier of Business Conduct AND MAKE IMPROV		CTS OP ALL TYPES AND NA	 TTIDE	8888
8. NAMES AND ADDRESS			TACHMENT) FILL IN SPACES		THMENTS
President Name Thomas A. Garland			Vice President Name Thomas A. Garland		
Street Address 4301 Riverview Blv	3		Street Address		
			4301 Riverview Blv	d.	
City Bradenton	State	Zip	City	State	Zip –
Secretary Name	FL	34209	Bradenton Treasurer Name	FL	34209
Thomas A. Garland Street Address			Thomas A. Garland Street Address	•	
4301 Riverview Blv	d.		4301 Riverview Blve	A	
City	State	Zip —	City	State	7:-
Bradenton	FL	34209	Bradenton	FL	<i>Zip</i> 34209
9. NAMES AND ADDRESS Director Name	ES OF THE DIRECT	TORS ("X" BOX FOR	ATTACHMENT) FILL IN SPACE	ES BEFORE USING ATTA	ACHMENTS
Thomas A. Garland			Director Name		
Street Address 4301 Riverview Blve	a.		Street Address	. بي ي	•
City			<u></u> _		
Bradenton	State FL	Zip	City	State	Zip
Director Name	r u	34209	Director Name		
Street Address			Street Address		
City	State	Zip	City	State -	Zip
10. SHARES AUTHORIZE	D <i>PY* BAY EAD ATT</i>	ACHARAM M			,
AUTHORIZED SHARES	D (A BOX TORALL)	ACAMENI) []	11. SHARES ISSUED ("X" BO)	(FOR ATTACHMENT) [
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· · · · · · · · · · · · · · · · · · ·	in ink by either th	e President, Vice Pi	resident, Secretary, Assistant	Secretary, Treasurer,	Receiver or Trustee
		5 m - 4 m x - 7 m	Underdonalni of samue 1	v double and off of the t	
			Under penalty of perjury, I this report, including any a	ccompanying schedules a	ind statements,
83495 DBC3/5/031;17::	37 PM		and that all statements con	tained Mercin are true and	corregi.
File Date 2350	5	ļ	Ohman	/ 2	118/05
Check No. 2246	<u> </u>		Thomas A. Gar	land Date	
B_{χ} .		l _	Print or Type Name of Officer		
FOR SECRETARY OF STATE U	SE ONLY		President		



STATE OF RHODE ISLAND AND PROVIDENCE PLANTA

Matthew A. Brown, Secretary of State Corporations Division 140

'iling Period: Januar	y I - March I 🏓 🛾 I	Filing Fee: \$50.00	PORT FOR THE		
FORM MUST BE TYPED					
Corporate ID No. *83495*	2 Name of Corpo PRINCETO	oration N INNOVATIONS, If	NC.		
Street Address Principal 4301 RIVERVIEW	Business Office	·	City BRADENTON	State F.L.	Zip
9417440355		5. State of Incorpora RHODE ISLA	ation	• • •	34209- 6 SIC Code 8888
Brief Description of the TO INVENT, DEVEL	Character of Business Co. OP, AND MAKE IMI		DUCTS OF ALL TYPES AN	D NATURE.	5020
8. NAMES AND ADDI	RESSES OF THE OF	FICERS ("X" BOX FOR	ATTACHMENT) ☐ FILL IN S	PACES BEFORE USING A	TTACHMENTS
Thomas A. Garla	ınd		Vice President Name Thomas A Caral		
Street Address	- 		Thomas A. Garl Street Address	and	
4301 Riverview	Blvd.		4301 Riverview	. 131	
City	State State	Zip			
Bradenton	FL	34209	<i>Cuy</i> Bradenton	State Tet	Zip
ecretary Name		34203	Treasurer Name	FL	34209
Thomas A. Garla	ind		Thomas A. Garla	and	
ireet Address			Sireel Address		
4301 Riverview	Blvd.		4301 Riverview	Blud	
City	State	Ziρ	City	State	a.
Bradenton	FL	34209	Bradenton	Sidie FL	Zip
9. NAMES AND ADDI	RESSES OF THE DIR	RECTORS ("X" BOX FO	RATTACHMENT) 🗌 FILL IN		34209 ATTACHMENTS
Thomas A. Garla	nd	·	Director Name		
Street Address	ina				
301 Riverview	מיינם		Sireei Address		
Siny		_			
Bradenton	State	Z _I p	City	State	Zip
Director Name	FL,	34209			
weetor frame			Director Name		
Treet Address			Street Address		
Sity	State	Zip	City	State .	Zip
10. SHARES AUTHOR	UZED ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED ("X	X" BOX FOR ATTACHMEN	m ∏
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lumber of Shares	Class/Series	Par Value	Number of Shares	Closs/Series	Par Value
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File Date	- LKFD
Check No.	APR 3 0 2004
В <u>у</u>	m29405
FOR SECRET	ARY OF STATE USE ONLY

Under penalts of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all systements contained herein are true and correct.

Thomas A. Garland
Print or Type Name of Officer

President Title of Officer

Form 630 12/01



FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

Office of the Secretary of State PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation *83495* PRINCETON INNOVATIONS, INC. 3. Street Address Principal Business Office City State Zip 4301 RIVERVIEW BLVD BRADENTON FL 34209-4. Business Phone No. 5. State of Incorporation 6. SIC Code 9417440355 RHODE ISLAND 8888 7. Brief Description of the Character of Business Conducted in Rhode Island TO INVENT, DEVELOP, AND MAKE IMPROVEMENTS TO PRODUCTS OF ALL TYPES AND NATURE. 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Thomas A. Garland Thomas A. Garland Street Address Street Address 4301 Riverview Blvd. 4301 Riverview Blvd. City State Zip City Zip Bradenton FL 34209 Bradenton FL Secretary Name Treasurer Name Thomas A. Garland Thomas A. Garland Street Address Sirect Address 4301 Riverview Blvd. 4301 Riverview Blvd. City State Zip City State Zip Bradenton FL 34209 Bradenton FL , 34209 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS பீirector Name Director Name Thomas A. Garland Street Address Street Address 4301 Riverview Blvd. City State Zip City State Zip Bradenton FL34209 Director Name Director Name Street Address Street Address City State Zio State Zip 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) II. SHARES ISSUED ("X" BOX FOR ATTACHMENT) **AUTHORIZED SHARES** ISSUED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 800 COMM NO PAR VALUE 50 |No par value Common This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee Under pegalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, *83495 DBC3/5/Q31:17:37 PM statements contained hacin are true and correct. File Date Check No. Th**¢**mas A. Garland

Print or Type Name of Officer

President



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

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(FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No.	2. Name of Corporation		· –	*	
83495	PRINCETON IN	NOVATIONS, INC.			
3. Street Address Principal Business 4301 Riverviet	oma W Blvd.		_{ार} Bradenton	State Florida	zip 34209
f. Business Phone No. (941) 744–035		5. State of Incorporation RHODE ISLAND			6. SIC Code 8888
. Brief Description of the Character Engineering/P1	of Business Conducted in RI roduct Desig	node Island N			
R. NAMES AND ADDRESS		RS (*X * BOX FOR ATTACH	MENT) FILL IN SPACES	BEFORE USING ATTACH	MENTS .
Thomas A. Garl	Land		Thomas A. Ga	rland	
treet Address 4301 Riverviev			Street Address 4301 Rivervi	ew Blvd.	
Bradenton	Florida	^{Zip} 34209	Gity Bradenton	State Florida	^{2ip} 34209
ecretary Name Thomas A. Gar]	land .		Thomas A. Ga	rland	
4301 Riverview			Street Address 4301 Rivervi	ew Blvd.	•
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Bradenton	Florida	34209	Bradenton	Florida	1 34209
Bradenton NAMES AND ADDRESS	Florida	34209	Bradenton	Florida	¹ 34209
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Bradenton NAMES AND ADDRESS iteetor Name Thomas A. Garl iteet Address 4301 Riverview	Florida ES OF THE DIRECT and Blvd.	ORS (*X* BOX FOR ATTAC	Bradenton HMENT) CFILL IN SPACE Director Name 3.7720 Street Address City	Florida	¹ 34209
Bradenton NAMES AND ADDRESS freetor Name Thomas A. Garl freet Address 4301 Riverview Bradenton freetor Name rect Address	Florida ES OF THE DIRECT and Blvd.	ORS (*X* BOX FOR ATTAC	Bradenton HMENT) CFILL IN SPACE Director Name Street Address City Director Name	Florida	¹ 34209
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a/12/2002
7144
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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Date

Signature of Officer

Thomas A. Garland
Print or Type Name of Officer

President

Title of Officer

Form 630 12/01

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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(FORM MUST BE TYPED IN BLACK)

1. Caracata (D. Na					
1. Corporate ID No. 83495	PRINCETON	NNOVATIONS, INC	•		
3. Street Address Principal Busin			City	State	Zip
4. Business Phone No. (941) 744	rview Blvd. -0355 acter of Business Conducted in R.	5. State of Incorporation RHODE ISLAND	Bradenton	Florida	34209 6 8888
Engineeri 8. NAMES AND ADDR President Name	ng/Product Des ESSES OF THE OFFICE	sign ERS (*X* BOX FOR ATTACH!	MENT) FILL IN SPACE Vice President Name	S BEFORE USING ATTACH	HMENTS
Thomas A. Street Address 4301 Rive	Garland rview Blvd.		Thomas A.	Garland	
City Bradenton Secretary Name	State Florida	34209	Same City Treasurer Name	State	Zip
Thomas A. Street Addréss Same	Garland		Thomas A. Street Address Same	Garland	-
City	State	Zip	City	State	. Zip
9. NAMES AND ADDR Director Name Thomas A.	ESSES OF THE DIRECT	TORS ("X" BOX FOR ATTAC	HMENT) FILL IN SPAC Director Name	ES BEFORE USING ATTA	CHMENTS
Street Address Same			Street Address		Fig. 500 s
City	State	ZIp	City	State	124 65 6
Director Name			Director Name	******	
Street Address			: Street Address		16 0.00 TE 5151
City	State .	Zip	ECITY	State	210 00 7 1
10. SHARES AUTHORI:	ZEI) ("X" BOX FOR ATTACH	IVENT)	11 SHADES (SCHED	(eve now con attractions)	-

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

ISSUED SHARES

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800 SHS COMM NO PAR VAL

Class/Series

AUTHORIZED SHARES

Number of Shares

	FILED
File Date:	
Check No.	FEB 21 2001
Bv:	By WO J
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FOR SECRETARY OF STATE USE ONLY

Underpenalty of perjury, I deciare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Use ature of Officer

Thomas A. Garland

Print or Type Name of Officer

President

Title of Officer

Class/Series

Common



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: Janua	ry I-March 1 •	Filing Fee: \$50.00		<u></u>	PLEASE READ INSERT CHONS
(FORM MUST BE TYPED IN B 1. Corporate ID No. 83495	2. Name of Corpora	^{tion} INNOVATIONS, IN	ıc.		
3. Street Address Principal Busine			City	State	Zip
76 Reservo	ir Circle	5. State of incorporation	Jamestown	RI	02835 6. SIC Code
(401)423-2 7. Brief Description of the Charac	545 cter of Business Conducted I	RHODE ISLAN n Rhode Island	D		
Engineerin 8. NAMES AND ADDRI President Name	g/Product Description	esign CERS (*x* box for attac	CHMENT) FILL IN SPAC	ES BEFORE USING ATTA	CHMENTS
Thomas A.	Garland		Thomas A.	Garland	
76 Reservó	ir Circle	Zip	Same _{City}	State	Zip
Jamestown Secretary Name	RI	02835.	Treasurer Name		
Thomas A. Street Address	Garland		Thomas A. Street Address	Garland	
Same	State	· 21p	Same _{City}	State	Zip
9. NAMES AND ADDRE	ESSES OF THE DIRE	CTORS (*X* BOX FOR ATI	FILL IN SPA	ACES BEFORE USING AT	IACHMENTS
Thomas A. Street Address	Garland		: Street Address		
Same	State	· Zip	; City	State	Zip
Director Name	••••••••••••••••••••••••••••••••••••••		Director Name		•
Street Address			. Street Address	•	
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZ AUTHORIZED SHARES	ED ("X" BOX FOR ATT)	ACHMENT)	11. SHARES ISSUEI	D ("X" BOX FOR ATTACHMEN	IT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
BOO SHS COMM NO	PAR VAL		50	Common	
This report must be sig	ned in ink by eith	er the President, Vice	President, Secretary, A	ssistant Secretary, Treas	surer, Receiver or Trustee
*	8 3 4 9 5 *			f perjury, I declare and affired in the second affired in the second and accompanying second in the	m that I have examined hedules and statements, and

	* 8 3 4 9 5 *
File Date:	PAID XIVAS
Check No.:	JAN 2 5 2000 WY
Ву:	SEC'Y OF STATE
FOR SECRETARY	OF STATE USE ONLY

and that an statements contained herein are true and correct.

Date

Signature of Officer Thomas A. Garland
Print or Type Name of Officer

President



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

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FORM MUST BE TYPED IN I	BLACK)					
1. Corporate ID No. 83495	2. Name of Corpor PRINCETO	N INNOVATIONS, IN	C.	·		== <u>/</u> _ '
3. Street Address Principal Bustn	ness Office		City -	· State	T ZIP	<u>,.</u>
76 Reservo:	ir Circle		Jamestown	. RI		j. L
4. Business Phone No.		T 5. State of Incorporation RHODE ISLA		NI	02835_	
(401)423-2			ND		0000	
7. Brief Description of the Chara			- .			
Engineering	g/Product De	esign				ŧ
8. NAMES AND ADDR	ESSES OF THE OFF	ICERS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES	BEFORE USING ATTAC	HMENTS	
, statint it pink			Vice President Name			
Thomas A. (Garland		Thomas A. G	arland		
Street Address			Street Address	· • •		
76 Reservoi	ir Circle	· · ·	Same			
•	State	Zip	City	State	Zip	
Jamestown	!RI	02835	· · · · · · · · · · · · · · · · · · ·			
Secretary Name			Treasurer Name	••••••••••••••••••••••••••••••		••••••
_ Thomas A. (Garland	· · · · · · · · · · · · · · · · · · ·	Thomas A. Ga	arland		
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Same		· · · · · · · · · · · · · · · · · · ·	Same		3	į
City	State	Zip	City	State	Zip	
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Director Name	ESSES OF THE DIR	ECTORS ("X" BOX FOR AT	TACHMENT) ELL IN SPACE	S BEFORE USING ATT	CHMENTS	
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Thomas A. C	ariand '	the same of		19 mg		
Same			Street Address	•• ••		,
City	State	- 1 9/2			<u> </u>	
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AUTHORIZED SHARES	BOX FOR MIT	ACHMENT)	11. SHARES ISSUED (X" BOX FOR ATTACHMENT	<u>'</u>	
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his report must be sig	ned in ink by eith	er the President, Vice	President, Secretary, Assis	stant Secretary, Treasu	rer, Receiver or T	(ruste
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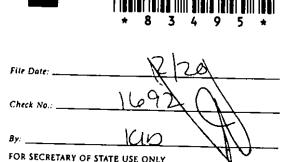
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK) PRINCETON INNOVATIONS, INC. 3. Street Address Principal Business Office City State Zip 76 Reservoir Circle Jamestown RI 02835 4. Business Phone No. 6. SIC Code RHODE ISLAND 401-423-2545 7. Brief Description of the Character of Business Conducted in Rhode Island Product Design 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name Thomas A. Garland Thomas A. Garland Street Address Street Address 76 Reservoir Circle Same City State State 210 Jamestown RI 02835 Secretary Name Thomas A. Garland Street Address Same City State City State 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Director Name : Director Name Street Address Street Address City State State Zip Director Name Director Name Street Address Street Address State 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSUEED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series 800 SHS COMM NO PAR VAL 50 Common

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signour of Officer

Date

Thomas A. Garland
Print or Type Name of Officer

President



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. . , 2. Name of Corporation , 83495 → PRINCETON INNOVATIONS, INC. → 3. Street Address Principal Business Office . City 76 Reservoir Circle RI Jamestown 02835 4. Business Phone No. · S. State of Incorporation 6. SIC Code 401/423-2545 RHODE ISLAND 7. Brief Description of the Character of Business Conducted in Rhode Island Product Design 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) President Name Vice President Name Thomas A. Garland Thomas A. Garland Street Address Street Address 76 Reservoir Circle same State 210 . Jamestown RI . 02835 Secretary Name Deasurer Name Thomas A. Garland Thomas A. Garland Street Address Street Address same same City State Zip City State 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) Thomas A. Garland Street Address Street Address same City Zip

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES ESSUEED SHARES Number of Shares Class/Series Par Value Number of Shares Class/Series 800 SHS COMM NO PAR VAL 50 Common

Director Name

Street Address

City

Street Address

This report must be signed in ink by either the President,	Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee
* 8 3 4 9 5 *	
File Date: 2	Under penalty of perjury, I declare and affirm that I have examined this resport, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
Check No.:	Signature of Officer Date Thomas A. Garland Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	President

THE HOLD CONFORMION **ANNUAL REPORT**

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State Corporations Division

100 North Main Street Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1 Filing Fee: \$50.00

1. CORPORATE ID NO.	2. NAME OF CORPORATI	PLEASE TYPE O	R PRINT IN BLACK INK.			
83495	PRIN	PRINCETON INNOVATIONS TWO				
3. STREET ADDRESS PRINCIPAL BUSINESS	OFFICE		an	STATE	ZIP COOE	
76 Reservoir Circle 4. BUSTNESS PHONE NO. 5. STATE OF INCOMPORATION			Jamestown	RI	02835	
401/423-2545 RHODE I			SLAND SLAND			
Product Desi		OOE ISLAND				
		AMES AND ADD	RESSES OF THE O			
			VICE PRESIDENT NAME			
Thomas A. Garland			Thomas A. Garland			
76 Reservoir Circle			STREET ADDRESS			
CITY	STATE	∑P C00€	same	STATE	720 C000€	
Jamestown SECRETARY NAME	RI	02835				
Thomas A. Garland			Thomas A. Garland			
same			STREET ADDRESS			
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same			STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		
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XRECTOR NAME						
			DIRECTOR HAME			
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	Th	is report must be SIG	NED IN INK by either th			
Presi	dent, Vice Presid	dent, Secretary, Assist	ant Secretary, Treasurer	, Receiver or Trustee		
				if Derium I declare and a		

File Date: 3/5/96
Check No: 12/3 Ву: For Secretary of State Use Only

under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. Signature of Officer Thomas A. Garland Print or Type Name of Officer

President