



Form Revision Date 07/2016

## ANNUAL REPORT

*(Required by Section 911, Act 284, Public Act of 1972)*

The identification number assigned by the Bureau is: 802312383

Annual Report Filing Year: 2020

1. Corporation Name:

NELSON STUD WELDING, INC.

2. The street address of the corporation's registered office and the name of the resident agent at that office:

1. Resident Agent Name: CSC-LAWYERS INCORPORATING SERVICE (COMPANY)  
 2. Street Address: 601 ABBOT ROAD  
 Apt/Suite/Other:  
 City: EAST LANSING  
 State: MI Zip Code: 48823

3. Mailing address of the corporation's registered office:

P.O. Box or Street Address:  
 Apt/Suite/Other:  
 City:  
 State: Zip Code:

4. Provide the names and business or residence addresses of the corporation's board of directors and its president, treasurer, and secretary:

Title	Name	Residence or Business Address
PRESIDENT	JOHN H. A. WYATT	1000 STANLEY DRIVE, NEW BRITAIN, CT 06053 USA
TREASURER	MICHAEL A. BARTONE	1000 STANLEY DRIVE, NEW BRITAIN, CT 06053 USA
SECRETARY	JANET M. LINK	1000 STANLEY DRIVE, NEW BRITAIN, CT 06053 USA
DIRECTOR	MICHAEL DAVID VAGNINI	1000 STANLEY DRIVE, NEW BRITAIN, CT 06053 USA
DIRECTOR	MICHAEL A. BARTONE	1000 STANLEY DRIVE, NEW BRITAIN, CT 06053 USA
DIRECTOR	YUN JUNG CHOI	1000 STANLEY DRIVE, NEW BRITAIN, CT 06053 USA

5. Describe the purposes and general nature and kind of business in which the corporation engaged in during the year covered by this report:

MANUFACTURING

6. Enter the apportionment percentage from the most recent filed Michigan tax return:

Total Authorized shares:	1200	Most recent apportionment percentage:	3.4234	For year ending:	2018 <input checked="" type="checkbox"/>
Previous attributable shares:	60000	Previous period apportionment percentage:		For year ending:	

This document must be signed by an authorized officer or agent:

Signed this 4th Day of May, 2020 by:

Signature	Title	Title if "Other" was selected
MICHAEL DAVID VAGNINI	Other	VICE PRESIDENT

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline       Accept

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS**  
**FILING ENDORSEMENT**

***This is to Certify that the*** 2020 ANNUAL REPORT

***for***

NELSON STUD WELDING, INC.

***ID Number:*** 802312383

***received by electronic transmission on*** May 04, 2020 ***, is hereby endorsed.***

***Filed on*** May 04, 2020 ***, by the Administrator.***

***The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.***



***In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 4th day of May, 2020.***

*Linda Clegg*

***Linda Clegg, Interim Director***

***Corporations, Securities & Commercial Licensing Bureau***