

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 856767

FILED  
Jun 11, 2012  
Secretary of State

Entity Name: TRANSLOGIC CORP.

**Current Principal Place of Business:**

10825 EAST 47TH AVE.  
DENVER, CO 80239

**New Principal Place of Business:**

**Current Mailing Address:**

10825 EAST 47TH AVE.  
ATTN: TAX DEPARTMENT  
DENVER, CO 80239

**New Mailing Address:**

FEI Number: 84-0911610      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301      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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: HOGANSON, K. MICHAEL  
Address: 10825 E 47TH AVE  
City-St-Zip: DENVER, CO 80239

Title: CFO  
Name: WILLIAMS, JOHN F  
Address: 10825 E 47TH AVE  
City-St-Zip: DENVER, CO 80239

Title: SECY  
Name: HAMILTON, CHAD  
Address: 10825 E 4TH AVE  
City-St-Zip: DENVER, CO 80239

Title: ASEC  
Name: CONDON, KATHLEEN  
Address: 10825 E 47TH AVE  
City-St-Zip: DENVER, CO 80239

Title: HR  
Name: DOLAN, YVETTE  
Address: 10825 E 47TH AVE  
City-St-Zip: DENVER, CO 80239

Title: ASEC  
Name: MICHELE, HOLCOMB  
Address: 10825 E 47TH AVE  
City-St-Zip: DENVER, CO 80239 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: JOHN F. WILLIAMS

CFO

06/11/2012

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

\_\_\_\_\_ Date