

2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 09, 2006
Secretary of State**

DOCUMENT# F02000000163

Entity Name: MITY-LITE, INC.

Current Principal Place of Business:

1301 WEST 400 NORTH
OREM, UT 84057

New Principal Place of Business:

Current Mailing Address:

1301 WEST 400 NORTH
OREM, UT 84057

New Mailing Address:

FEI Number: 87-0448892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22ND STREET, 4TH FLOOR
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NIELSON, BRAD
Address: 1301 WEST 400 NORTH
City-St-Zip: OREM, UT 84057

Title: V () Delete
Name: STOKER, KEVIN
Address: 1301 WEST 400 NORTH
City-St-Zip: OREM, UT 84057

Title: S () Delete
Name: DYE, GREG
Address: 1301 WEST 400 NORTH
City-St-Zip: OREM, UT 84057

Title: CD () Delete
Name: WILSON, GREGORY
Address: 1301 WEST 400 NORTH
City-St-Zip: OREM, UT 84057

Title: DD () Delete
Name: CRUMP, RALPH
Address: #28 TRISTED OAK
City-St-Zip: TRUMBULL, CT 06611

Title: D () Delete
Name: NAJAR, PETER
Address: 9900 PHILLIPS ROAD
City-St-Zip: LAFAYETTE, CO 80026

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: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KEVIN STOKER

V

03/09/2006

Electronic Signature of Signing Officer or Director

_____ Date