

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005578

FILED
Apr 24, 2009
Secretary of State

Entity Name: OLYMPUS IMAGING AMERICA INC.

Current Principal Place of Business:

3500 CORPORATE PARKWAY
CENTER VALLEY, PA 180340610

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 610
CENTER VALLEY, PA 180340610

New Mailing Address:

FEI Number: 76-0765221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: GUMZ, MARK F
Address: 3500 CORPORATE PKWY
City-St-Zip: CENTER VALLEY, PA 18034

Title: S () Delete
Name: MILLER, DONNA
Address: 3500 CORPORATE PKWY
City-St-Zip: CENTER VALLEY, PA 18034

Title: T () Delete
Name: WATANABE, KAZUHIRO
Address: 3500 CORPORATE PKWY
City-St-Zip: CENTER VALLEY, PA 18034

Title: AT () Delete
Name: FLEURETON, TANA
Address: 3500 CORPORATE PKWY
City-St-Zip: CENTER VALLEY, PA 18034

Title: D () Delete
Name: GUMZ, MARK F
Address: 3500 CORPORATE PKWY
City-St-Zip: CENTER VALLEY, PA 18034

Title: D () Delete
Name: HIROSHI, KOMIYA M
Address: BLDG. 3-1
City-St-Zip: TOKYO, JA

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
Name:
Address:
City-St-Zip:

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

Title: D (X) Change () Addition
Name: MATSUSHITA, HIROHIDE M
Address: 3500 CORPORATE PARKWAY
City-St-Zip: CENTER VALLEY, PA 18034

I hereby certify that the information supplied with this filing does not qualify 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: KAZUHIRO WATANABE

_____ Electronic Signature of Signing Officer or Director

TRES

04/24/2009

_____ Date