2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 840990

FILED Jan 09, 2007 Secretary of State

Entity Name: METAL TREATING INSTITUTE INC. Current Principal Place of Business: New Principal Place of Business: 1550 ROBERTS DRIVE JACKSONVILLE BEACH, FL 322503222 US **Current Mailing Address: New Mailing Address:** 1550 ROBERTS DRIVE JACKSONVILLE BEACH, FL 322503222 US FEI Number: 13-6089629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLER, M LANCE 1550 ROBERTS DRIVE JACKSONVILLE BEACH, FL 32250 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete RUDY, JUDITH Name: Name: 2980 SPRING GROVE AVE Address: Address: City-St-Zip: CINCINNATI, OH 45225 US City-St-Zip: Title: CEO () Delete Title: () Change () Addition Name: MILLER, M LANCE, Name: Address: 1550 ROBERTS DRIVE Address: City-St-Zip: JACKSONVILLE BEACH, FL 322503222 City-St-Zip: Title: () Delete Title: (X) Change () Addition MARY WIBERG, SPRINGER GARY, HUSS Name: Name: Address: 301 TRAVIS LANE Address: 979 KOOPMAN LANE City-St-Zip: WAUKESHA, WI 53186 US City-St-Zip: ELKHORN, WI 53121 US Title: () Delete Title: (X) Change () Addition PENROSE, RICHARD T Name: Name: PENROSE, RICHARD T Address: 37955 CENTRAL CT Address: 37955 CENTRAL CT City-St-Zip: NEWARK, CA 94560 US City-St-Zip: NEWARK, CA 94560 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: M LANCE MILLER CEO 01/09/2007