

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003199

FILED
Aug 14, 2009
Secretary of State

Entity Name: STRYKER IMAGING CORPORATION

Current Principal Place of Business:

1410 LAKESIDE PARKWAY
SUITE 600
FLOWER MOUNT, TX 75028 US

New Principal Place of Business:

Current Mailing Address:

2825 AIRVIEW BLVD
KALAMAZOO, MI 49002 US

New Mailing Address:

FEI Number: 65-1017159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ENQUIST, WILLIAM R
Address: 5900 OPTICAL CT
City-St-Zip: SAN JOSE, CA 95138

Title: V () Delete
Name: LUM, ERIC
Address: 2825 AIRVIEW BLVD
City-St-Zip: KALAMAZOO, MI 49002

Title: V () Delete
Name: WINKEL, THOMAS R
Address: 2825 AIRVIEW BLVD
City-St-Zip: KALAMAZOO, MI 49002

Title: CFOD () Delete
Name: BERGY, DEAN H
Address: 2825 AIRVIEW BLVD
City-St-Zip: KALAMAZOO, MI 49002

Title: D () Delete
Name: JOHNSON, STEPHEN S
Address: 2825 AIRVIEW BLVD
City-St-Zip: KALAMAZOO, MI 49002

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:

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: ERIC LUM

VP

08/14/2009

Electronic Signature of Signing Officer or Director

Date