## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07023

**Entity Name: MODERN CONTROLS CORPORATION** 

FILED Jan 09, 2007 Secretary of State

y		recivities control city their	•		
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	MS AVENUE A, CA 92562	US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
UNIT C	MS AVENUE A, CA 92562	US	26550 ADAMS AVENUE MURRIETA, CA 92562	US	
FEI Number:	59-2052470	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address of N	Name and Address of New Registered Agent:	
WHITTEMORE, MARLA 29221 BIRDS EYE DRIVE WESLEY CHAPEL, FL 33543 US			WHITTEMORE, MARLA 15615 BUTTERFISH PL BRADENTON, FL 34202	2 US	
	named entity s of Florida.	submits this statement for the p	urpose of changing its registered o	office or registered agent, or both,	
SIGNATURE:				01/09/2007	
	Electron	ic Signature of Registered Age	nt	Date	
Election Can	npaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PT () MCCURRY, MC 45506 CORTE TEMECULA, CA	NARBONNE	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () MCCURRY, YO 45506 CORTE TEMECULA, CA	NARBONNE	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	S () ANDREW, MICI 6811 MAPLE LI CARLSBAD, CA	EAF DRIVE	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title:	T ()	Delete	Title: (	) Change()Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL ANDREW S 01/09/2007

ANDREW, MICHAEL G

CARLSBAD, CA 92011

6811 MAPLE LEAF DRIVE

Name:

Address:

City-St-Zip: