

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005014

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: STRYKER SALES CORPORATION

## Current Principal Place of Business:

2825 AIRVIEW BLVD  
KALAMAZOO, MI 49002

## New Principal Place of Business:

## Current Mailing Address:

2825 AIRVIEW BLVD  
KALAMAZOO, MI 49002

## New Mailing Address:

FEI Number: 38-2902424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

Title: T ( ) Delete  
Name: HOMRICH, CHRISTOPHER F  
Address: 2825 AIRVIEW BLVD  
City-St-Zip: KALAMAZOO, MI 49002

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

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

Title: VP T ( ) Delete  
Name: LUM, ERIC  
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: VP (X) Change ( ) Addition  
Name: CARPENTER, LONNY  
Address: 2825 AIRVIEW BLVD  
City-St-Zip: KALAMAZOO, MI 49002

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 T

04/30/2008

Electronic Signature of Signing Officer or Director

Date