

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90154 024 ***150.00

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1. Entity Name
CARL ZEISS, INC.



Principal Place of Business
**ONE ZEISS DRIVE
THORNWOOD, NY 10594 US**

Mailing Address
**ONE ZEISS DRIVE
ATTN: TAX DEPARTMENT
THORNWOOD, NY 10594 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01312006 Chg-P CR2E034 (11/05)

4. FEI Number
13-1495820

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
SUITE 105
1201 HAYS STREET
TALLAHASSEE, FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
KURZ, DIETER DR
ONE ZEISS DRIVE
THORNWOOD, NY 10594** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
JAMES J KELLY
ONE ZEISS DRIVE
THORNWOOD, NY 10594** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
JAMES A. SHARP
ONE ZEISS DRIVE
THORNWOOD, NY 10594** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GORN, NORBERT DR
ONE ZEISS DRIVE
THORNWOOD, NY 10594** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VTS
ALTSCHULER, CRAIG
ONE ZEISS DRIVE
THORNWOOD, NY 10594** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HEINZ-RAFFIN, KARL
ONE ZEISS DR
THORNWOOD, NY 10594** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
SCOTT MARGOLIN
ONE ZEISS DRIVE
THORNWOOD, NY 10594** ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SCOTT A. MARGOLIN

4/10/06
Date

914-681-7657
Daytime Phone #