

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003377

FILED
Apr 24, 2007
Secretary of State

Entity Name: UTI CORPORATION

Current Principal Place of Business:

200 W 7TH AVE
COLLEGEVILLE, PA 19426

New Principal Place of Business:

Current Mailing Address:

200 W 7TH AVE
COLLEGEVILLE, PA 19426

New Mailing Address:

FEI Number: 23-1721795

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: DP () Delete
Name: SPARKS, RON
Address: 100 FORDHAM ROAD
City-St-Zip: WILMINGTON, MA 01887

Title: D () Delete
Name: MATHEWS, TIMOTHY
Address: 100 FORDHAM ROAD
City-St-Zip: WILMINGTON, MA 01887

Title: ASAT () Delete
Name: LEMKER, THOMAS F
Address: 200 WEST 7TH AVENUE
City-St-Zip: COLLEGEVILLE, PA 19426

Title: ST () Delete
Name: FISHER, STEWART A
Address: 200 W 7TH AVE
City-St-Zip: COLLEGEVILLE, PA 19426

Title: DCFO () Delete
Name: FISHER, STEWART A
Address: 200 W. 7TH AVE.
City-St-Zip: COLLEGEVILLE, PA 19426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FREEMAN, KENNETH W
Address: 2800 SAND HILL ROAD
City-St-Zip: MENLO PARK, CA 94025

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 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: THOMAS F. LEMKER

ASAT

04/24/2007

Electronic Signature of Signing Officer or Director

Date