

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000374

FILED
Apr 18, 2007
Secretary of State

Entity Name: HIGH VOLTAGE MAINTENANCE CORPORATION

Current Principal Place of Business:

5100 ENERGY DR.
DAYTON, OH 45414

New Principal Place of Business:

Current Mailing Address:

8760 ORION PL
STE 110
COLUMBUS, OH 43240 US

New Mailing Address:

FEI Number: 31-0725293 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: VPD () Delete
Name: BAUER, C.T.
Address: 8000 W. FLORISSANT AVENUE
City-St-Zip: ST. LOUIS, MO 63136

Title: AT () Delete
Name: MOON, D.C.
Address: 8000 W. FLORISSANT AVENUE
City-St-Zip: ST. LOUIS, MO 63136

Title: S () Delete
Name: SMITH, H.M.
Address: 8000 W. FLORISSANT AVENUE
City-St-Zip: ST. LOUIS, MO 63136

Title: TAS () Delete
Name: FOLEY, MJ
Address: 8760 ORION PLACE STE 110
City-St-Zip: COLUMBUS, OH 43240

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR (X) Change () Addition
Name: WESTMAN, TIM
Address: 8000 W. FLORISSANT AVENUE
City-St-Zip: ST. LOUIS, MO 63136

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: NATION, TOM
Address: 5100 ENERGY DRIVE
City-St-Zip: DAYTON, OH 45414

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: MIKE FOLEY

Electronic Signature of Signing Officer or Director

TAS

04/18/2007

Date