

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002620

FILED
Feb 15, 2010
Secretary of State

Entity Name: IMATION ENTERPRISES CORP.

Current Principal Place of Business:

1 IMATION PLACE
DISCOVERY 1D-28
OAKDALE, MN 55128

New Principal Place of Business:

1 IMATION WAY
OAKDALE, MN 55128

Current Mailing Address:

1 IMATION PLACE
DISCOVERY 1D-28
OAKDALE, MN 55128

New Mailing Address:

1 IMATION WAY
OAKDALE, MN 55128

FEI Number: 41-1838502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DIRE
Name: RUSSOMANNO, FRANK
Address: 1 IMATION WAY
City-St-Zip: OAKDALE, MN 55128

Title: SECR
Name: SULLIVAN, JOHN L
Address: 1 IMATION WAY
City-St-Zip: OAKDALE, MN 55128

Title: ASEC
Name: FUERST, MARY J
Address: 1 IMATION WAY
City-St-Zip: OAKDALE, MN 55128

Title: CFO
Name: ZELLER, PAUL R
Address: 1 IMATION WAY
City-St-Zip: OAKDALE, MN 55128

Title: TREA
Name: GALLAHER, TIM S
Address: 1 IMATION WAY
City-St-Zip: OAKDALE, MN 55128

Title: PRES
Name: LUCAS, MARK
Address: 1 IMATION WAY
City-St-Zip: OAKDALE, MN 55128

I hereby 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 all other like empowered.

SIGNATURE: MARY FUERST

ASEC

02/15/2010

Electronic Signature of Signing Officer or Director

Date