2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000104

Entity Name: HACH ULTRA ANALYTICS, INC.

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
481 CALIFORNIA AVENUE GRANTS PASS, OR 97526								
Current Mailing Address:				New Mailing Address:				
6095 PARKLAND BLVD SUITE 310 MAYFIELD HEIGHTS, OH 44124			6095 PARKLAND BLVD SUITE 310 MAYFIELD HEIGHTS, OH 44124					
FEI Number: 94-2353743 FEI Number Applied For () FEI Number			nber Not Applicable () Certificate of Status Desired ()					
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US								
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:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () D NIGEL, HOOD 481 CALIFORNIA GRANTS PASS, C			Title: Name: Address: City-St-Zip:	P (X) CLARK, JONATI 5600 LINDBERG LOVELAND, CC	G DR.		
Title: Name: Address: City-St-Zip:	VP/D () DITKOFF, JAMES 2099 PENNSYLV WASHINGTON, D	ANIA AVE NW		Title: Name: Address: City-St-Zip:	VP/T (X) MCFADEN, FRA 2099 PENNSYL WASHINGTON,	VANIA AVE NW		
Title: Name: Address: City-St-Zip:	VP/S () C O'REILLY, JAMES 2099 PENNSYLV WASHINGTON, D	ANIA AVE NW		Title: Name: Address: City-St-Zip:	VP/T (X) O'REILLY, JAMI 2099 PENNSYL WASHINGTON,	VANIA AVE NW		
Title: Name: Address: City-St-Zip:	T/AS () E SCHWERTNER, 0 6095 PARKLAND CLEVELAND, OH	CHARLES A BLVD STE 310		Title: Name: Address: City-St-Zip:	SCHWERTNER	D BLVD STE 310		
Title: Name: Address: City-St-Zip:	VP/D () COMAS, DANIEL 2099 PENNSYLV WASHINGTON, D	ANIA AVE NW		Title: Name: Address: City-St-Zip:	D (X) LUTZ, ROBERT 2099 PENNSYL WASHINGTON,	VANIA AVE NW		
Title: Name: Address: City-St-Zip:	D (X) D LUTZ, ROBERT S 2099 PENNSYLV WASHINGTON, D	ANIA AVE NW		Title: Name: Address: City-St-Zip:	()	Change () Addition		

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: CHARLES A. SCHWERTNER AS/T 04/22/2009