

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002464

Entity Name: CARL ZEISS IMT CORP

FILED
Mar 11, 2010
Secretary of State

Current Principal Place of Business:

6250 SYCAMORE LANE N
MAPLE GROVE, MN 55369

New Principal Place of Business:

Current Mailing Address:

C/O TAX DEPARTMENT
ONE ZEISS DRIVE
THORNWOOD, NY 10594

New Mailing Address:

FEI Number: 13-3917663

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: VPOP
Name: SCHEZNTHOREZ, JOSEF
Address: 1 ZEISS DR
City-St-Zip: THORNWOOD, NY

Title: S
Name: MARGOLIN, SCOTT A
Address: ONE ZEISS DR
City-St-Zip: THORNWOOD, NY 10594

Title: PRES
Name: LEE, GREGORY D
Address: 6250 SYCAMORE LANE N
City-St-Zip: MAPLE GROVE, MN 55369

Title: VT
Name: GROW, CHRIS
Address: 6250 SYCAMORE LANE N
City-St-Zip: MAPLE GROVE, MN 55369

Title: D
Name: OHNHEISER, RAINER
Address: 6250 SYCAMORE LANE N
City-St-Zip: MAPLE GROVE, MN 55369

Title: D
Name: ZIPPERER, MATTHIAS
Address: 6250 SYCAMORE LANE N
City-St-Zip: MAPLE GROVE, MN 55369

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: SCOTT MARGOLIN

SEC

03/11/2010

Electronic Signature of Signing Officer or Director

Date