2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 06, 2004 08:00 ÅN Secretary of State DOCUMENT # F9900004569 EMPI SALES CORP. Mailing Address Principal Place of Business 599 CARDIGAN ROAD 599 CARDIGAN ROAD ST. PAUL MN 55126-4099 ST. PAUL MN 55126-4099 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 41-1947725 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) **526 E PARK AVENUE** TALLAHASSEE FL 32301 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE Registered Agent signature required when roinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition Delete TITLE TITLE U000000080497 NAME LAPTEWICZ, JOSEPH E JR. NAME 03/08/04-80110-025 150.00 599 CARDIGAN ROAD STREET ADDRESS STREET ADDRESS ST. PAUL MN 55126-4099 CHY-ST-ZIF CITY - ST - ZIP ■ Addition TITLE Delete TITLE ☐ Change NAME SPANGLER, PATRICK D NAME 599 CARDIGAN ROAD STREET ADDRESS STREET ADDRESS ST. PAUL MN 55126-4099 CITY-ST-ZIP CITY - ST- ZIP TITLE Delete ☐ Change ☐ Addition NAME VIERLING, H. PHILIP NAME STREET ADDRESS STREET ADDRESS 599 CARDIGAN ROAD DITY-ST-ZIE CITY-ST-ZIP ST. PAUL MN 55126-4099 ☐ Addition ☐ Change TITLE Delete TITLE STRAND, JOAN E NAME NAME STREET ADDRESS 599 CARDIGAN ROAD STREET ADDRESS SAINT PAUL MN 55126 CITY-ST-ZIP CITY - ST - ZVP Change ☐ Addition TITLE TITLE Delete CLAPP, ROBERT W NAME 599 CARDIGAN ROAD STREET ADDRESS STREET ADDRESS ST. PAUL MN 55126-4099 CITY-ST-ZIP DITY-ST-ZIP Change Addition Defete TITLE HUTTO, BARBARA C NAME NAME 599 CARDIGAN ROAD STREET ADDRESS STREET ADDRESS SAINT PAUL MN 55126 CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

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changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

Date

Date

Dayline Phone #