


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90062 049 ***150.00

DOCUMENT # P15037 1. Entity Name O.C. TANNER RECOGNITION COMPANY					
Principal Place of Business 1930 SOUTH STATE STREET SALT LAKE CITY, UT 84115			Mailing Address 1930 SOUTH STATE STREET SALT LAKE CITY, UT 84115		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 87-0440228	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V TREU, TIM 1930 S STATE ST SALT LAKE CITY, UT		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PETERSEN, DAVID 1930 S STATE STREET SALT LAKE CITY, UT 84115		TITLE NAME STREET ADDRESS CITY - ST - ZIP	p Petersen, David 1930 S. State Street Salt Lake City, UT 84115	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ANGER, ROBERT K. 853 E CANYON BREEZE AVE DRAPER, UT		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MURDOCK, KENT H 3015 CRAIG DR SALT LAKE CITY, UT		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Murdock, Kent H. 1930 S. State Street Salt Lake City, UT 84115	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KATZ, BRIAN E 1930 SO STATE STREET SALT LAKE CITY, UT 84115		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JORGENSEN, KAYE T 1930 SO STATE STREET SALT LAKE CITY, UT 84115		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <u><i>Brian E Katz</i></u> Brian E Katz <u>2/4/08</u> <u>801-493-3503</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					