

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19032

FILED
Apr 30, 2009
Secretary of State

Entity Name: STARKEY LABORATORIES, INC.

Current Principal Place of Business:

6700 WASHINGTON AVENUE SOUTH
EDEN PRAIRIE, MN 55344

New Principal Place of Business:

ATTN: LEGAL DEPT.
6700 WASHINGTON AVENUE SOUTH
EDEN PRAIRIE, MN 55344

Current Mailing Address:

6700 WASHINGTON AVENUE SOUTH
EDEN PRAIRIE, MN 55344

New Mailing Address:

ATTN: LEGAL DEPT.
6700 WASHINGTON AVENUE SOUTH
EDEN PRAIRIE, MN 55344

FEI Number: 41-0913126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: S () Delete
Name: MUSSELL, SUSAN
Address: 6700 WASHINGTON AVE S
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: P () Delete
Name: RUZICKA, JEROME
Address: 6700 WASHINGTON AVE S.
City-St-Zip: EDEN PRAIRIE, MN

Title: V () Delete
Name: NELSON, SCOTT
Address: 6700 WASHINGTON AVE SO
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: C () Delete
Name: AUSTIN, WILLIAM F
Address: 6700 WASHINGTON AVE S
City-St-Zip: EDEN PRAIRIE, MN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SUSAN MUSSELL

SEC

04/30/2009

Electronic Signature of Signing Officer or Director

Date