2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P33557 1. Entity Name MUNTERS CORPORATION

Principal Place of Business

79 MONROE ST AMESBURY, MA 01913 Mailing Address

P.O. BOX 640

AMESBURY, MA 01913-0640

FILED Jan 17, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01112006 No Chg-P CR2E034 (11/05)

4. FEI Number 84-0830599

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYES ST TALLAHASSEE, FL 32301

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.						
SIGNATURE_	Signature, typed or printed name of registered agent and title	applicable. [NOTE, Registered Age	los neriw beslupes erufengie (ne	nstaling)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			\$5.00 M		· -	
10.	OFFICERS AND DIREC	TORS	************			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDONALD, MICHAEL 79 MONROE ST AMESBURY, MA 01913			e ja on engar <mark>k</mark> an na kan e	e di Tarangan da ka	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOV EISENHAURE, JAMES 79 MONROE ST AMESBURY, MA 01913			01/19/06	00387113 5-80025-015	150.60
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RELD, LAUREN 2008 BLOOMINGDALE RD GLENDALE HEIGHTS, IL 60139			DO NOT W	/RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CAMPBELL, CHUCK 16900 JORDAN SCHERTZ, TX 78154			IN THIS S	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DROHAN, DERRICK 79 MONROE ST AMESBURY, MA 01913					
TITLE NAME STREET_ADDRESS CITY-ST-ZIP			e de la companya de l			
12. I hereby a indicated of the corchanged	certify that the information supplied with this f I on this report or supplemental report is true reporation or the receiver or rustee empowere or on an attachment with an address, with a	iling does not qualify for the exemp and accurate and that my signature d to execute this report as required I other like empowered.	otions contained in Cr shall have the same by Chapter 607, Flori	apter 119, Florida Statutes, egal effect as if made under da Statutes; and that my nar	I further certify that to coath, that I am an off ne appears in Block	he information ficer or director 10 or Block 11 if

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