

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33557

FILED
Jan 06, 2009
Secretary of State

Entity Name: MUNTERS CORPORATION

Current Principal Place of Business:

79 MONROE ST
AMESBURY, MA 01913

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 640
AMESBURY, MA 019130640

New Mailing Address:

FEI Number: 84-0830599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYES ST
TALLAHASSEE, FL 32301 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: PD () Delete
Name: MCDONALD, MICHAEL
Address: 79 MONROE ST
City-St-Zip: AMESBURY, MA 01913

Title: VSTD () Delete
Name: POTAVIN, GARY
Address: 79 MONROE ST
City-St-Zip: AMESBURY, MA 01913

Title: VP () Delete
Name: REID, LAUREN
Address: 2008 BLOOMINGDALE RD
City-St-Zip: GLENDALE HEIGHTS, IL 60139

Title: VP () Delete
Name: CAMPBELL, CHUCK
Address: 16900 JORDAN
City-St-Zip: SCHERTZ, TX 78154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: REID, LAUREN
Address: 2008 BLOOMINGDALE RD
City-St-Zip: GLENDALE HEIGHTS, IL 60139

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: GARY POTAVIN

VSTD

01/06/2009

Electronic Signature of Signing Officer or Director

Date