

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848239

Entity Name: ABLELIGHT INC.

Current Principal Place of Business:

600 HOFFMANN DRIVE
WATERTOWN, WI 53094-6223

Current Mailing Address:

600 HOFFMANN DRIVE
WATERTOWN, WI 53094-6223 US

FEI Number: 39-0806446

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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

Officer/Director Detail :

Title PRESIDENT, CEO
Name JONES, KEITH
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title TREASURER, DIRECTOR
Name ODZER, RANDALL
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name TRYTEK, ELLEN
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name WIKTOR, JOHN
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title SECRETARY, DIRECTOR
Name STEVENSON, MAURA
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name TRICOLI, CHRISTINE
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR, CHAIRMAN
Name RYMARCSUK, JIM
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name CARTER, KAREN
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MAURA STEVENSON

SECRETARY

03/08/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CONNER, MALCOLM
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name PERRY, MINDY
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name MISKO, THOR
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name TOEDT, MICHAEL
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name NORRIS, SUSAN
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223

Title DIRECTOR
Name VAUGHN, TIMOTHY
Address 600 HOFFMANN DRIVE
City-State-Zip: WATERTOWN WI 53094-6223