2025 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2025
Secretary of State
7461484354CC

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

Continues on page 2

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 03/10/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	VC
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