


2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90193 004 \*\*\*150.00

DOCUMENT # F01000002728			
1. Entity Name OEC MEDICAL SYSTEMS, INC.			
Principal Place of Business 384 WRIGHT BROTHERS DRIVE SALT LAKE CITY, UT 84116		Mailing Address PO BOX 2216 SCHENECTADY, NY 12301-2216	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code
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 the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO PEPPER, JOSEPH 384 WRIGHT BROTHERS DRIVE SALT LAKE CITY, UT 84116 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT PATRICK MCNAMEE 384 WRIGHT BROTHERS DRIVE SALT LAKE CITY UT 84116 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCFO VERHOEF, CLARENCE 384 WRIGHT BROTHERS DRIVE SALT LAKE CITY, UT 84116 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JASON HANSON - SECRETARY 3000 N. GRANDVIEW BLVD WAUKESHA, WI 53188 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MELITA, BARBARA A 12 CORPORATE WOODS BLVD ALBANY, NY 12211 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BUCHANAN, MARK E 12 CORPORATE WOODS BLVD ALBANY, NY 12211 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Barbara A Melita</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #
		4/22/04	(518)433-4337



F39055-OEC Medical Systems, Inc.

Report Date: 01/07/2004

Federal ID : 94-2538512

Tax Year : 2003 Rpt Mth : 12

Attachment  
84068197  
#F01000002728

Name	Title	Business Address
Ann-Marie McElligott	Assistant Treasurer	12 Corporate Woods Blvd. Albany NY 12211
Ann-Marie McElligott	Vice President	12 Corporate Woods Blvd. Albany NY 12211
Barbara A. Melita	Assistant Secretary	12 Corporate Woods Boulevard Albany NY 12211 US
Barbara A. Melita	Vice President	12 Corporate Woods Boulevard Albany NY 12211 US
Jason Hanson	General Counsel	3000 N Grandview Blvd., Waukesha WI 53188 US
Jason Hanson	Secretary	3000 N Grandview Blvd., Waukesha WI 53188 US
Kenneth J. Contursi	Assistant Secretary	12 Corporate Woods Blvd Albany NY 12211 US
Kenneth J. Contursi	Vice President	12 Corporate Woods Blvd Albany NY 12211 US
Lewis Dudley	Vice President	384 Wright Brothers Drive Salt Lake City UT 84116 US
Mark E. Buchanan	Vice President	12 Corporate Woods Boulevard Albany NY 12211 US
Mark E. Buchanan	Assistant Treasurer	12 Corporate Woods Boulevard Albany NY 12211 US
Michael Chen	Treasurer	384 Wright Brothers Drive Salt Lake UT 84116 US
Patrick McNamee	President	384 Wright Brothers Drive Salt Lake UT 84116 US
Peter Y. Solmsen	Director	3000 N. Grandview Blvd Waukesha WI 53188 US