

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000163

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: MITY-LITE, INC.

**Current Principal Place of Business:**

1301 WEST 400 NORTH  
OREM, UT 84057

**New Principal Place of Business:**

**Current Mailing Address:**

1301 WEST 400 NORTH  
OREM, UT 84057

**New Mailing Address:**

FEI Number: 87-0448892      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SOUTHWEST 22ND STREET, 4TH FLOOR  
MIAMI, FL 33145 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: P ( ) Delete  
Name: HALES, RANDALL  
Address: 1301 WEST 400 NORTH  
City-St-Zip: OREM, UT 84057

Title: V ( ) Delete  
Name: STOKER, KEVIN  
Address: 1301 WEST 400 NORTH  
City-St-Zip: OREM, UT 84057

Title: S ( ) Delete  
Name: KILPACK, PAUL  
Address: 1301 WEST 400 NORTH  
City-St-Zip: OREM, UT 84057

Title: CD ( ) Delete  
Name: WILSON, GREGORY  
Address: 1301 WEST 400 NORTH  
City-St-Zip: OREM, UT 84057

Title: DD ( ) Delete  
Name: CRUMP, RALPH  
Address: #28 TRISTED OAK  
City-St-Zip: TRUMBULL, CT 06611

Title: D ( ) Delete  
Name: ROSS, BRANDON  
Address: 1301 W 400 N  
City-St-Zip: OREM, UT 84057

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: BRANDON ROSS

D

03/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date