

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000000109

**Entity Name:** FLIR DETECTION, INC.

**Current Principal Place of Business:**

27700 SW PARKWAY AVENUE  
WILSONVILLE, OR 97070

**Current Mailing Address:**

27700 SW PARKWAY AVENUE  
WILSONVILLE, OR 97070

**FEI Number:** 77-0619113

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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 DIRE  
Name LEWIS, EARL R  
Address 27700 SW PARKWAY AVENUE  
City-State-Zip: WILSONVILLE OR 97070

Title DIRE  
Name DAVIS, WILLIAM W  
Address 27700 SW PARKWAY AVENUE  
City-State-Zip: WILSONVILLE OR 97070

Title DIRE  
Name SUNDERMEIER, WILLIAM  
Address 27700 SW PARKWAY AVENUE  
City-State-Zip: WILSONVILLE OR 97070

Title PRES  
Name SUNDERMEIER, WILLIAM  
Address 27700 SW PARKWAY AVENUE  
City-State-Zip: WILSONVILLE OR 97070

Title CFO  
Name TRUNZO, TONY  
Address 27700 SW PARKWAY AVENUE  
City-State-Zip: WILSONVILLE OR 97070

Title SEC  
Name DAVIS, WILLIAM  
Address 27700 SW PARKWAY AVENUE  
City-State-Zip: WILSONVILLE OR 97070

Title ASSISTANT SECRETARY  
Name CHRISTIANSEN, HEATHER  
Address 27700 SW PARKWAY AVENUE  
City-State-Zip: WILSONVILLE OR 97070

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

**SIGNATURE:** HEATHER CHRISTIANSEN

**ASSISTANT SECRETARY** 04/11/2013

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date