

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006328

FILED
Mar 26, 2012
Secretary of State

Entity Name: DANIEL MEASUREMENT SERVICES, INC.

Current Principal Place of Business:

11100 BRITTMOORE PARK DR.
HOUSTON, TX 77041 US

New Principal Place of Business:

Current Mailing Address:

8100 W FLORISSANT AVENUE
P O BOX 36911
SAINT LOUIS, MO 63136 US

New Mailing Address:

FEI Number: 76-0497827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: PD
Name: STOKES, JON
Address: 12616 INDUSTRIAL BLVD.
City-St-Zip: ELK RIVER, MN 55330 US

Title: AT
Name: BURNETT, T A
Address: 8100 W. FLORISSANT AVENUE
City-St-Zip: ST. LOUIS, MO 63136 US

Title: SD
Name: PALMER, R C
Address: 11100 BRITTMOORE PARK DRIVE
City-St-Zip: HOUSTON, TX 77041 US

Title: AS
Name: CHELESNIK, STEVEN A
Address: 12001 TECHNOLOGY DRIVE
City-St-Zip: EDEN PRAIRIE, MN 55344 US

Title: T
Name: THOMPSON, T.
Address: 8200 MARKET BLVD.
City-St-Zip: CHANHASSEN, MN 55317 US

Title: DVP
Name: BROWN, R L
Address: 11100 BRITTMOORE PARK DRIVE
City-St-Zip: HOUSTON, TX 77041

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: TERESA A. BURNETT

AT

03/26/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date