

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02470

Entity Name: MAGNETEK, INC.

FILED  
Apr 12, 2010  
Secretary of State

**Current Principal Place of Business:**

N49 W13650 CAMPBELL DRIVE  
MENOMONEE FALLS, WI 53051

**New Principal Place of Business:**

**Current Mailing Address:**

N49 W13650 CAMPBELL DRIVE  
MENOMONEE FALLS, WI 53051

**New Mailing Address:**

FEI Number: 95-3917584

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PCEO  
Name: MCCORMICK, PETER M  
Address: N49 W13650 CAMPBELL DRIVE  
City-St-Zip: MENOMONEE FALLS, WI 53051

Title: CFO  
Name: SCHWENNER, MARTY J  
Address: N49 W13650 CAMPBELL DRIVE  
City-St-Zip: MENOMONEE FALLS, WI 53051

Title: VP  
Name: SHELLMAN, JOLENE J  
Address: N49 W13650 CAMPBELL DRIVE  
City-St-Zip: MENOMONEE FALLS, WI 53051

Title: DIR  
Name: BLOSS, DAVID A  
Address: N49 W13650 CAMPBELL DRIVE  
City-St-Zip: MENOMONEE FALLS, WI 53051

Title: SGC  
Name: CRAMER, SCOTT  
Address: N49 W13650 CAMPBELL DRIVE  
City-St-Zip: MENOMONEE FALLS, WI 53051

Title: DIR  
Name: JORDEN, YON YOON  
Address: N49 W13650 CAMPBELL DRIVE  
City-St-Zip: MENOMONEE FALLS, WI 53051

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: KELLY LETTMANN

POA

04/12/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date