2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004760

Entity Name: SAFC BIOSCIENCES, INC.

FILED Feb 18, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	INER BLVD.	or Business.		New I IIII	part face of Ba	Jiness.
Current Mailing Address:				New Mailing Address:		
3050 SPRUCE ST. ST. LOUIS, MO 63103				3050 SPRUCE ST ST LOUIS, MO 63103		
FEI Number: 48-1154290 FEI Number Applied For () FEI Number			FEI Num	mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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.						
SIGNATUR		Signature of Registered Agent	<u> </u>			 Date
Election Cam		Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ()[KELLEY, RODNE 11296 RENNER LENEXA, KS 66:	BLVD.		Title: Name: Address: City-St-Zip:	PD (X) Ch KELLEY, RODNEY 11296 RENNER BL LENEXA, KS 6621	VD.
Title: Name: Address: City-St-Zip:	TD () ERICHTER, KIRK . 3050 SPRUCE S	Т.		Title: Name: Address: City-St-Zip:	T (X) Ch RICHTER, KIRK A 3050 SPRUCE ST. ST. LOUIS, MO 63	ange () Addition
Title: Name: Address: City-St-Zip:	S () [KASKOWITZ, JE 168 N. MERAME ST. LOUIS, MO	C AVE.		Title: Name: Address: City-St-Zip:	S (X) Ch KEFFER, RICHARE 3050 SPRUCE ST ST. LOUIS, MO 63	
Title: Name: Address: City-St-Zip:	AT ()[PEHRSON, THOI 11296 RENNER LENEXA, KS 66	RPE BLVD.		Title: Name: Address: City-St-Zip:	() Ch:	ange()Addition
Title: Name: Address: City-St-Zip:	CD () D WICKS, FRANKL 3050 SPRUCE S ST. LOUIS, MO	Т.		Title: Name: Address: City-St-Zip:	() Ch:	ange()Addition
Title: Name: Address: City-St-Zip:	ASD ()E HOGAN, MICHAE 3050 SPRUCE S ST. LOUIS, MO	Т.		Title: Name: Address: City-St-Zip:	D (X) Ch NAGARKATTI, JAI F 3050 SPRUCE ST. ST. LOUIS, MO 63	

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: KIRK A RICHTER T 02/18/2009