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## **2001 UNIFORM BUSINESS REPORT (UBR)**

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## Mar 20, 2001 8:00 am DOCUMENT # F98000002064 Secretary of State HIDEN ANALYTICAL, INC. 03-20-2001 90036 002 \*\*\*150.00 Principal Place of Business Mailing Address 75 HANCOCK RD STE D 5 FOREST STREET PETERBOROUGH MA 03458 ANTRIM NH 03440 731799 2. Principal Place of Business 3. Mailing Address 75 HANCOCK ROAD <u>C/O\_RSA, LLC 400 HUNNEWELL ST</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE H City & State City & State 4. FEI Number Applied For 02-0484938 Not Applicable PETERBOROUGH. NEEDHAM\_HEIGHTS MA Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П 03<u>458</u> Fee Required 02494 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PD ☐ Addition TITLE ☐ Delete TITLE ☐ Change NEALE, I.D. NAME MARIA 420 EUROPA BLVD. STREET ADDRESS STREET ADDRESS CITY~ST-ZIP CITY-ST-7IP WARRINGTON ENGLAND ☐ Delete TITLE Change ☐ Addition TITLE RUSSELL, T.H. NAME NAME 420 EUROPA BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP WARRINGTON ENGLAND ☐ Delete ☐ Addition TITLÈ ☐ Change TITLE HATTON, P.J. NAME NAME 420 EUROPA BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WARRINGTON ENGLAND ☐ Addition TITLE ☐ Delete TITLE Change BLACAS, ROBERT NAME NAME 420 EUROPA BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP WARRINGTON ENGLAND CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ☐ Change ANDERSON, A. FRED NAME NAME STREET ADDRESS **5 FOREST STREET** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ANTRIM NH 03440 ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

LIRE AND TWEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR