

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000101643

**Entity Name:** DIMENSIONAL DOSING SYSTEMS, INCORPORATED

**Current Principal Place of Business:**

2465 DOGWOOD DRIVE  
WEXFORD, PA 15090

**Current Mailing Address:**

2465 DOGWOOD DRIVE  
WEXFORD, PA 15090

**FEI Number: 65-0879041**

**Certificate of Status Desired: No**

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

BETTERTON, GREG AP.A.  
735 EAST VENICE AVENUE  
SUITE 200  
VENICE, FL 34285 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 D  
Name BETTERTON, GREG  
Address 625 APALACHICOLA  
City-State-Zip: VENICE FL 38285

Title D  
Name LEFROCK, JACK MD  
Address 647 WATERSIDE WAY  
City-State-Zip: SARASOTA FL 34242

Title PCEO  
Name MCMICHAEL, JOHN P  
Address 2465 DOGWOOD DRIVE  
City-State-Zip: WEXFORD PA 15090

*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: GREG BETTERTON**

**MANAGER**

**01/15/2014**

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

\_\_\_\_\_  
Date