

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 13, 2013
Secretary of State
CC1740736285

Entity Name: THE JACKSON LABORATORY, INCORPORATED

Current Principal Place of Business:

610 MAIN STREET
BAR HARBOR, ME 04609

Current Mailing Address:

610 MAIN STREET
BAR HARBOR, ME 04609

FEI Number: 01-0211513

Certificate of Status Desired: No

Name and Address of Current 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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHRM
Name HOLT, LEO A
Address 101 SOUTH KING STREET
City-State-Zip: GLOUCESTER CITY NJ 08030

Title CEO
Name LIU, EDISON B DR.
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title COO
Name HEWETT, CHARLES E PHD
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title ASST. SECRETARY
Name ROBINSON, JANA L
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title CFO
Name JENSEN, LINDA A
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title SECRETARY
Name GERRITY, PETER F
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name CABOT, DAVID R
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name CORBET, KATHLEEN A
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA A. JENSEN

**CHIEF FINANCIAL
OFFICER**

03/13/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name D'AMBROSIO, LOUIS J
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name ELLIMAN, DAVID D
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TREASURER
Name GALLOGLY, JAMES J
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title VC
Name JANEWAY, WESLIE R
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name LITTLE, SAM R
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name MILCH, NEAL B ESQ.
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name ROUX, DAVID J
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name VOLPE, TOM S
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name DUNN, JEFFREY M DR.
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name EVNIN, ANTHONY B PHD
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name GURIN, RICHARD S
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name LANNAMANN, RICHARD S
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name MANIATIS, TOM P PHD
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name RICE, CHARLES M PHD
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title TRUSTEE
Name VALLE, DAVID DR.
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609

Title ASST. TREASURER
Name VETELINO, JOSEPH A
Address 610 MAIN STREET
City-State-Zip: BAR HARBOR ME 04609