## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002680

Entity Name: ARIOSA DIAGNOSTICS, INC.

#### **Current Principal Place of Business:**

5945 OPTICAL CT SAN JOSE, CA 95138

### **Current Mailing Address:**

5945 OPTICAL CT SAN JOSE, CA 95138

## FEI Number: 26-3739826

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD. 155 OFFICE PLAZA DR TALLAHASSEE, FL 32301 US

Date

FILED Mar 14, 2014

Certificate of Status Desired: No

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

# Officer/Director Detail :

Title	D	Title	D
Name	KAMDAR, KIM	Name	AICHER, MICHAEL
Address	ONE PALMER SQ SUITE 515	Address	5945 OPTICAL CT
City-State-Zip:	PRINCETON NJ 08542	City-State-Zip:	SAN JOSE CA 95138
Title	D	Title	D
Name	ROBERTS, BRYAN	Name	SONG, KEN
Address	3340 HILLVIEW AVE	Address	5945 OPTICAL CT
City-State-Zip:	PALO ALTO CA 94304	City-State-Zip:	SAN JOSE CA 95138
Title	D	Title	D
Name	STUELPNAGEL, JOHN	Name	YOUNG, BILL
Address	1921 BATH ST	Address	801 GATEWAY BLVD SUITE 410
City-State-Zip:	SANTA BARBARA CA 93101	City-State-Zip:	S SAN FRANCISCO CA 94080

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

CFO

Electronic Signature of Signing Officer/Director Detail

#### **Officer/Director Detail Continued :**

Title	CFO	Title	COO
Name	PUCKETT, DAN	Name	MULLARKEY, DAVID
Address	5945 OPTICAL CT	Address	5945 OPTICAL CT
City-State-Zip:	SAN JOSE CA 95138	City-State-Zip:	SAN JOSE CA 95138
Title	SR. VP DEVELOPMENT	Title	CHIEF MEDICAL OFFICER
Title Name	SR. VP DEVELOPMENT SPARKS, ANDREW	Title Name	CHIEF MEDICAL OFFICER MUSCI, THOMAS
Name	SPARKS, ANDREW	Name	MUSCI, THOMAS