

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000004793

Entity Name: HOLOGIC, INC.**Current Principal Place of Business:**35 CROSBY DRIVE
BEDFORD, MA 01730**Current Mailing Address:**250 CAMPUS DRIVE
MARLBOROUGH, MA 01752**FEI Number:** 04-2902449**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	VS	Title	PRESIDENT, CEO, DIRECTOR
Name	CASEY, MARK J	Name	CASCELLA, ROBERT A
Address	250 CAMPUS DRIVE	Address	250 CAMPUS DRIVE
City-State-Zip:	MARLBOROUGH MA 01752	City-State-Zip:	MARLBOROUGH MA 01752
Title	VP, ASST. SECRETARY, ASST. TREASURER, CFO, DIRECTOR	Title	D
Name	MUIR, GLENN P	Name	CRAWFORD, SALLY W
Address	35 CROSBY DRIVE	Address	250 CAMPUS DRIVE
City-State-Zip:	BEDFORD MA 01730	City-State-Zip:	MARLBOROUGH MA 07152
Title	D	Title	D
Name	CUMMING, JOHN W	Name	LAVANCE, DAVID RJR.
Address	250 CAMPUS DRIVE	Address	250 CAMPUS DRIVE
City-State-Zip:	MARLBOROUGH MA 07152	City-State-Zip:	MARLBOROUGH MA 07152

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: MARK J. CASEY**SECRETARY****04/30/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date