

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F96000000197

**Entity Name:** MEDTOX LABORATORIES, INC.

**Current Principal Place of Business:**

402 WEST COUNTY ROAD D  
ST. PAUL, MN 55112

**Current Mailing Address:**

231 MAPLE AVENUE  
BURLINGTON, NC 27215 US

**FEI Number:** 52-1130579

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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            DIRECTOR, PRESIDENT, SECRETARY  
Name            EBERTS, F. SAMUEL III  
Address        531 S SPRING STREET  
City-State-Zip: BURLINGTON NC 27215

Title            DIRECTOR  
Name            VAN DER VAART, SANDY  
Address        402 WEST COUNTY ROAD D  
City-State-Zip: ST. PAUL MN 55112

*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:** EBERTS , F. SAMUEL , III

**SECRETARY**

**01/24/2018**

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

\_\_\_\_\_  
Date