

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006024

FILED
Mar 26, 2015
Secretary of State
CC7857511068

Entity Name: REMEL INC.

Current Principal Place of Business:

12076 SANTA FE DRIVE
SUITE 200
LENEXA, KS 66215

Current Mailing Address:

81 WYMAN ST
WALTHAM, MA 02454 US

FEI Number: 74-2826694

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR., STE A
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 HOOGASIAN, SETH H
Address 81 WYMAN STREET
City-State-Zip: WALTHAM MA 02454

Title ASSISTANT SECRETARY
Name HISSONG, DAVID
Address 81 WYMAN STREET
City-State-Zip: WALTHAM MA 02454

Title TREASURER, ASSISTANT SECRETARY
Name SMITH, ANTHONY H
Address 81 WYMAN STREET
City-State-Zip: WALTHAM MA 02454

Title ASSISTANT SECRETARY
Name HUGHES, GIANNI M
Address 81 WYMAN STREET
City-State-Zip: WALTHAM MA 02454

Title ASSISTANT SECRETARY, ASSISTANT TREASURER
Name BRUNI, JAMES E
Address 300 INDUSTRY DRIVE
City-State-Zip: PITTSBURGH PA 15275

Title ASSISTANT SECRETARY, ASSISTANT TREASURER
Name MICHAUD, MICHAEL K
Address 81 WYMAN STREET
City-State-Zip: WALTHAM MA 02454

Title ASSISTANT TREASURER
Name SPELLMAN, MAURA A
Address 81 WYMAN STREET
City-State-Zip: WALTHAM MA 02454

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: JAMES E BRUNI

ASSISTANT SECRETARY 03/26/2015

Electronic Signature of Signing Officer/Director Detail

Date