2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006114

Entity Name: GEN-PROBE SALES & SERVICE, INC.

Current Principal Place of Business:

10210 GENETIC CENTER DRIVE SAN DIEGO, CA 92121

Current Mailing Address:

10210 GENETIC CENTER DRIVE SAN DIEGO, CA 92121 US

FEI Number: 33-0767987 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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:

Name

Electronic Signature of Registered Agent

Officer/Director Detail :

Title VICE PRESIDENT AND ASSISTANT Title VICE PRESIDENT AND TREASURER

> **SECRETARY** Name LERNER, MARCI J. LIDDY, ANNE M. 250 CAMPUS DRIVE Address

250 CAMPUS DRIVE Address MARLBOROUGH MA 01752 City-State-Zip:

City-State-Zip: MARLBOROUGH MA 01752

Title DIRECTOR VΡ Title

DOLAN, PATRICIA K. Name DOLAN, PATRICIA K. Name Address 250 CAMPUS DRIVE

250 CAMPUS DRIVE Address City-State-Zip: MARLBOROUGH MA 01752

City-State-Zip: MARLBOROUGH MA 01752

Title **PRESIDENT** Title **DIRECTOR**

GRIFFIN, JOHN M. Name Name LERNER, MARCI J. Address 250 CAMPUS DRIVE

Address 250 CAMPUS DRIVE City-State-Zip: MARLBOROUGH MA 01752

City-State-Zip: MARLBOROUGH MA 01752

Title VICE PRESIDENT AND ASSISTANT Title

TREASURER VICE PRESIDENT AND ASSISTANT

TREASURER Name COHN, BENJAMIN J. Name RANA. SARAH A. Address 250 CAMPUS DRIVE

Address 250 CAMPUS DRIVE City-State-Zip: MARLBOROUGH MA 01752

MARLBOROUGH MA 01752 City-State-Zip:

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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.

05/30/2020 SIGNATURE: PATRICIA K. DOLAN SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

FILED May 30, 2020

Secretary of State

2176409065CC

Date

Officer/Director Detail Continued:

Title DIRECTOR Title SECRETARY

NameCOHN, BENJAMIN J.NameDOLAN, PATRICIA K.Address250 CAMPUS DRIVEAddress250 CAMPUS DRIVE

City-State-Zip: MARLBOROUGH MA 01752 City-State-Zip: MARLBOROUGH MA 01752