

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P37566

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

**Current Principal Place of Business:**

27027 TOURNEY ROAD  
VALENCIA, CA 91355

**Current Mailing Address:**

500 PLAZA DRIVE  
SECAUCUS, NJ 07094 US

**FEI Number:** 95-2961036

**Certificate of Status Desired:** No

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

CSC  
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            PRESIDENT  
Name            DOHERTY, CATHERINE T.  
Address        500 PLAZA DRIVE  
City-State-Zip: SECAUCUS NJ 07094

Title            SECRETARY  
Name            O'SHAUGHNESSY JR., WILLIAM J.  
Address        500 PLAZA DRIVE  
City-State-Zip: SECAUCUS NJ 07094

Title            VP, TREASURER  
Name            PATEL, SANDIP R.  
Address        500 PLAZA DRIVE  
City-State-Zip: SECAUCUS NJ 07094

Title            DIRECTOR  
Name            EGLINTON MANNER, CARRIE E.  
Address        27027 TOURNEY ROAD  
City-State-Zip: VALENCIA CA 91355

Title            VP  
Name            CALAMARI, STEPHEN A  
Address        500 PLAZA DRIVE  
City-State-Zip: SECAUCUS NJ 07094

*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:** WILLIAM J. O'SHAUGHNESSY JR.

**SECRETARY**

**03/27/2020**

Electronic Signature of Signing Officer/Director Detail

Date