FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **518292** **(8)**

1. Corporation Name

GENETIC SYSTEMS, INC.

Principal Place of Business	Mailing Address
C/O MARTIN K STAVENHAGEN P O BOX 562 LEHIGH ACRES FL 33970	C/O MARTIN K STAVENHAGEN P O BOX 562 LEHIGH ACRES FL 33970

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: **11/10/1976**

3a. Date of Last Report: **07/21/1995**

4. FEI Number: **59-1714024** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STAVENHAGEN, MARTIN K.
14190 BRIAR LN
LEHIGH ACRES FL 33970

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE:

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	DADANT, N J		12 NAME		
STREET ADDRESS	C/O DADANT & SONS INC		13 STREET ADDRESS		
CITY-ST-ZIP	HAMILTON, IL 00000		14 CITY-ST-ZIP		
TLE	TS	☐ DELETE	21 TITLE		☐ Change ☐ Addition
ME	DADANT, T C		22 NAME		
REET ADDRESS	C/O DADANT & SONS INC		23 STREET ADDRESS		
Y-ST-ZIP	HAMILTON, IL 00000		24 CITY-ST-ZIP		
LE	D	☐ DELETE	31 TITLE		☐ Change ☐ Addition
ME	ROSS, T G		32 NAME		
EET ADDRESS	C/O DADANT & SONS INC		33 STREET ADDRESS		
-ST-ZIP	HAMILTON, IL 00000		34 CITY-ST-ZIP		
LE	P	☐ DELETE	41 TITLE		☐ Change ☐ Addition
ME	YORK, HARVEY		42 NAME		
REET ADDRESS	C/O YORK BEE COMPANY		43 STREET ADDRESS		
Y-ST-ZIP	JESUP GA		44 CITY-ST-ZIP		
LE	DM	☐ DELETE	51 TITLE		☐ Change ☐ Addition
AME	STAVENHAGEN, MARTIN K		52 NAME		
TREET ADDRESS	P O BOX 562		53 STREET ADDRESS		
TY-ST-ZIP	LEHIGH ACRES FL		54 CITY-ST-ZIP		
TLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 3/19/96 912-427-7311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

HARVEY F YORK JR PRESIDENT

CR2E034 (12/95)