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May 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 834922

(7)

1. Corporation Name

BIO/DATA CORPORATION

Principal Place of Business

155 CENTENNIAL PLAZA
P.O. BOX 347
HORSHAM PA 19044-0347

Mailing Address

155 CENTENNIAL PLAZA
P.O. BOX 347
HORSHAM PA 19044-0347

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/26/1975

4. FEI Number

23-1715445

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MESSA, EUGENE J
STREET ADDRESS 800 PEBBLE HILL RD.
CITY-ST-ZIP DOYLESTOWN PA

TITLE D
NAME CRAMER, HAROLD
STREET ADDRESS 728 PINE ST.
CITY-ST-ZIP PHILADELPHIA PA

TITLE VT
NAME BELL, BARRY J
STREET ADDRESS 74 STEEPLECHASE DR.
CITY-ST-ZIP DOYLESTOWN PA

TITLE VP
NAME MESSA, MARK W.
STREET ADDRESS 297 FOX HOUND DR.
CITY-ST-ZIP DOYLESTOWN PA

TITLE D
NAME ST. ONGE, J.
STREET ADDRESS 3010 ARCH RD.
CITY-ST-ZIP NORRISTOWN PA

TITLE D
NAME QUICK, DONALD
STREET ADDRESS MEDFORD LEAS APT. 143
CITY-ST-ZIP MEDFORD NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE DIRECTOR
2.2 NAME VIRGINIA Q. WILSON
2.3 STREET ADDRESS 12 ABERDEEN ROAD
2.4 CITY-ST-ZIP CHATHAM, NJ 07928
VICE PRESIDENT - DIRECTOR

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE VICE PRESIDENT - DIRECTOR
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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.

CR2E034 (10/97)