

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000981

Entity Name: ALERE MEDICAL, INC.

FILED
Mar 18, 2009
Secretary of State

Current Principal Place of Business:

595 DOUBLE EAGLE CT.
RENO, NV 89521

New Principal Place of Business:

Current Mailing Address:

595 DOUBLE EAGLE CT.
RENO, NV 89521

New Mailing Address:

FEI Number: 94-3238845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: GERATY, MD, RON
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: ASEC () Delete
Name: KRACHUN, WAYNE
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: TRSR () Delete
Name: KRACHUN, WAYNE
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: VP () Delete
Name: CARTELLI, KATHY
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: DIR () Delete
Name: MULLOY, JENNIFER
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV RENO

Title: DIR (X) Delete
Name: TADLER, RICHARD
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GERATY, RON MD
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: SEC (X) Change () Addition
Name: CHINIARA, ELLEN
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: TRES (X) Change () Addition
Name: TEITEL, DAVID
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: VP (X) Change () Addition
Name: PIERNIK, KEN
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: DIR (X) Change () Addition
Name: GERATY, RON MD
Address: 595 DOUBLE EAGLE CT.
City-St-Zip: RENO, NV 89521

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MANDELIN HENDRICKS

POA

03/18/2009

Electronic Signature of Signing Officer or Director

Date