

# F0200000 6381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

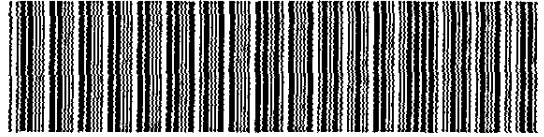
(Document Number)

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TALLAHASSEE, FLORIDA

# TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CTI MOLECULAR IMAGING, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DEBORAH RODGERS  
(Name of Person)

CTI MOLECULAR IMAGING, INC.  
(Firm/Company)

810 INNOVATION DRIVE  
(Address)

KNOXVILLE, TN 37932  
(City/State and Zip code)

For further information concerning this matter, please call:

DEBORAH RODGERS at 865-218-3222  
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA  
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**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee       \$78.75 Filing Fee & Certificate of Status       \$78.75 Filing Fee & Certified Copy       \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. CTI MOLECULAR IMAGING, INC. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. DELAWARE (State or country under the law of which it is incorporated) 3. 62-1377363 (FEI number, if applicable)

4. MAY 20, 2002 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 810 INNOVATION DRIVE, KNOXVILLE, TN 37932 (Principal office address)

810 INNOVATION DRIVE, KNOXVILLE, TN 37932 (Current mailing address)

8. SALES OF MEDICAL EQUIPMENT (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: C T CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD

PLANTATION, Florida 33324 (City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

CT Corporation System

Mary R. Adams (Registered agent's signature)

MARY R. ADAMS ASSISTANT SECRETARY

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: SEE ATTACHED SCHEDULE.

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: SEE ATTACHED SCHEDULE.

Address:

Vice President:

Address:

Secretary:

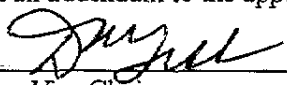
Address:

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

David D Gill CFO

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA

**CTI Molecular Imaging, Inc.**  
**Delaware Corporation**  
**62-1377363**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**PRESIDENT:**

Terry D. Douglass 413-68-3849 2123 Lakepoint Drive, Knoxville, TN 37922

**SECRETARY:**

Greg Brophy 511-48-2383 810 Innovation Drive, Knoxville, TN 37932

**ASSISTANT SECRETARY:**

Anne Sale 412-11-8769 9124 Farrell Park Lane, Knoxville, TN 37922

**VICE PRESIDENTS:**

Ronald Nutt 412-62-0174 2121 Lakepoint Drive, Knoxville, TN 37922

Mark Rhoads 230-70-6081 810 Innovation Drive, Knoxville, TN 37932

David Gill 144-52-2279 849 Poet's Corner Way, Knoxville, TN 37919

Thomas J. Hook 102-60-4255 810 Innovation Drive, Knoxville, TN 37932

**DIRECTORS:**

Terry D. Douglass 413-68-3849 2123 Lakepoint Drive, Knoxville, TN 37922

Ronald Nutt 412-62-0174 2121 Lakepoint Drive, Knoxville, TN 37922

Leroy M. Hood 516-36-9880 The Institute for Systems Biology  
1441 N. 34<sup>th</sup> Street, Seattle, WA 98103

Frederick W. Eubank, II One First Union Center, Charlotte, NC 28288

William McInnes 587-32-8107 116 30<sup>th</sup> Avenue, South, Nashville, TN 37212

Michael E. Phelps 538-36-1935 UCLA School of Medicine, 650 Charles Young Drive,  
Los Angeles, California 90095-1735

Bernd Haetzel Siemens Medical Solutions USA, Inc.  
4040 Nelson Avenue, Concord, CA 94520

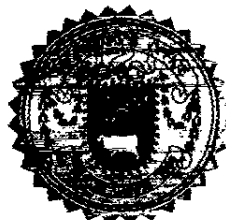
# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CTI MOLECULAR IMAGING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF NOVEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3506559 8300

AUTHENTICATION: 2087231

020699437

DATE: 11-13-02