## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F0400000507

Entity Name: ANGIODYNAMICS, INC.

FILED Apr 02, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 603 QUEENSBURY AVE QUEENSBURY, NY 12804 **Current Mailing Address: New Mailing Address:** 603 QUEENSBURY AVE QUEENSBURY, NY 12804 FEI Number: 11-3146460 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PCFO** ( ) Delete Title: (X) Change ( ) Addition HOBBS, EAMONN P Name: Name: KELTJENS, JAN 61 FITZGERALD RD 603 QUEENSBURY AVUENUE Address: Address: City-St-Zip: QUEENSBURY, NY 12804 City-St-Zip: QUEENSBURY, NY 12804 Title: VΡ Title: ( ) Delete (X) Change ( ) Addition Name: APPLING, WILLIAM M Name: APPLING, WILLIAM M 8291 STATE ROUTE 40 8291 STATE ROUTE 40 Address: Address: GRANVILLE, NY 12832 GRANVILLE, NY 12832 City-St-Zip: City-St-Zip: Title: FVP ( ) Delete Title: () Change () Addition GERSUK, JOSEPH D Name: Name: 36 EAST RIDGE ROAD Address: Address: LOUDONVILLE, NY 12211 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MAPES, HAROLD C MAPES, HAROLD C Name: Name: Address: 16 SWEETBRIAR LANR Address: 16 SWEETBRIAR LANE City-St-Zip: QUEENSBURY, NY 12804 City-St-Zip: QUEENSBURY, NY 12804 Title: Title: (X) Change ( ) Addition ( ) Delete SOTO, JOHN Name: MCDONALD, DAVID Name: 5 KNAPP HILL 603 QUEENSBURY AVENUE Address: Address: DUFERMLINE FIFE, UK KY118WG City-St-Zip: City-St-Zip: QUEENSBURY, NY 12804 Title: () Delete Title: ( ) Change (X) Addition Name: Name: MORRIS, SEAN 603 QUEENSBURY AVENUE Address: Address: City-St-Zip: City-St-Zip: QUEENSBURY, NY 12804

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: D. JOSEPH GERSUK EVP 04/02/2009