

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001109

FILED
May 01, 2012
Secretary of State

Entity Name: BIOSAN LABORATORIES, INC.

Current Principal Place of Business:

8 BOWERS RD
DERRY, NH 03038

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 325
DERRY, NH 03038

New Mailing Address:

FEI Number: 02-0436846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PDIR
Name: CRAVEN, ROBERT U
Address: 8 BOWERS RD
City-St-Zip: DERRY, NH 03038

Title: VPT
Name: PECORE, DAVID N
Address: 653 RIDGEFIELD AVE
City-St-Zip: PITTSBURGH, PA 15216

Title: VPSD
Name: NESTOR, JACK
Address: 50 PUBLIC SQUARE, 29TH FLOOR
City-St-Zip: CLEVELAND, OH 44113

Title: DIR
Name: BURKE, ROBERT
Address: 8 COBBLESTONE LANE
City-St-Zip: ANDOVER, MA 01810

Title: DIR
Name: TILEY, DAVID
Address: 7596 N. VINEMONT CT
City-St-Zip: HUDSON, OH 44236

Title: DIR
Name: WHITMAN, ANDREW
Address: 205 W. RANDOLPH ST
City-St-Zip: CHICAGO, IL 60606

I hereby 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 all other like empowered.

SIGNATURE: ROBERT U. CRAVEN

PDIR

05/01/2012

Electronic Signature of Signing Officer or Director

Date