

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000000044

**Entity Name:** ART'S WAY SCIENTIFIC, INC.

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

203 OAK STREET  
MONONA, IA 52159

**New Principal Place of Business:**

**Current Mailing Address:**

5556 HWY 9 P O BOX 288  
ARMSTRONG, IA 50514 US

**New Mailing Address:**

**FEI Number:** 20-5437242

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 EAST OAK AVENUE  
TALLAHASSEE, FL 32301 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: P  
Name: MCCONNELL, J. WARD JR  
Address: 2018 W VERNON AVE  
City-St-Zip: KINSTON, NC 28504

Title: VP  
Name: MAJESKI, CARRIE  
Address: 5556 HWY 9  
City-St-Zip: ARMSTRONG, IA 50514

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: CARRIE MAJESKI

VP

03/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date