2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004997

Entity Name: WEIDMANN DIAGNOSTIC SOLUTIONS INC.

FILED Mar 17, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4701 CRUMP ROAD BUILDING A LAKE HAMILTON, FL 33851

Current Mailing Address: New Mailing Address:

PO BOX 407 3717 MEMORIAL DRIVE ST. JOHNSBURY, VT 05819

FEI Number: 06-2582360 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 US

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:

Name: YANNUCCI, DEAN A
Address: 80 SOUTH MAIN STREET
City-St-Zip: HANOVER, NH 03755

Title: D

Name: GOOLGASIAN, JEFFREY
Address: 80 SOUTH MAIN STREET
City-St-Zip: HANOVER, NH 03755

Title: D

Name: TSCHUDI, DANIEL
Address: 80 SOUTH MAIN STREET
City-St-Zip: HANOVER, NH 03755

Title: F

Name: GOOLGASIAN, JEFFREY
Address: 80 SOUTH MAIN STREET
City-St-Zip: HANOVER, NH 03755

Title: VP

Name: COPELAND, III, MANTON Address: 80 SOUTH MAIN STREET City-St-Zip: HANOVER, NH 03755

Title: S

Name: WHEELER, JR, JAMES G

Address: 90 PROSPECT STREET PO BOX 99 ST

City-St-Zip: ST. JOHNSBURY, VT 05819

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: MANTON COPELAND. III VP 03/17/2011