

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005442

Entity Name: DUSA PHARMACEUTICALS, INC.

FILED
Jun 06, 2008
Secretary of State

Current Principal Place of Business:

25 UPTON DRIVE
WILMINGTON, MA 01887

New Principal Place of Business:

Current Mailing Address:

25 UPTON DRIVE
WILMINGTON, MA 01887

New Mailing Address:

FEI Number: 22-3103129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHULMAN, D GEOFFREY MD
Address: 555 RICHARD STREET WEST, SUITE 300
City-St-Zip: TORONTO, ONTARIO M5V 3B1, XX XX

Title: VC () Delete
Name: HAFT, JAY M ESQ.
Address: 110 E 57TH STREET, SUITE 14A
City-St-Zip: NEW YORK, NY 10022

Title: PD () Delete
Name: DOMAN, ROBERT F CEO
Address: 25 UPTON DRIVE
City-St-Zip: WILMINGTON, MA 01887

Title: S () Delete
Name: MANTELL, NANETTE E ESQ.
Address: 136 MAIN STREET, SUITE 250
City-St-Zip: PRINCETON, NJ 08540

Title: D () Delete
Name: LUFKIN, RICHARD C SB,MBA
Address: 2 WALNUT CIRCLE
City-St-Zip: BASKIN RIDGE, NJ 07920

Title: D () Delete
Name: ABELES, JOHN H MD
Address: 2365 NW 41ST STREET
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MANTELL, NANETTE W ESQ.
Address: 136 MAIN STREET, SUITE 250
City-St-Zip: PRINCETON, NJ 08540

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NANETTE W. MANTELL, ESQ.

SEC

06/06/2008

Electronic Signature of Signing Officer or Director

Date