

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 17 1997 8:00am
Secretary of State

DOCUMENT # F94000001691 (4)

1. Corporation Name
IXION BIOTECHNOLOGY, INC.

Principal Place of Business

12085 RESEARCH DRIVE
ALACHUA FL 32615
US

Mailing Address

12085 RESEARCH DR
ALACHUA FL 32615-6832
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

04/04/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3174033

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~THE PRENTICE-HALL CORPORATION SYSTEM, INC.~~
SUITE 105
1201 HAYS STREET
TALLAHASSEE FL 32301

81 Name

CSC The United States Corporation Co.

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type: 1 or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD
NAME GAINES, WEAVER H
STREET ADDRESS 9922 SW 41ST ROAD
CITY-STATE-ZIP GAINESVILLE FL

☐ DELETE

1.1 TITLE V
1.2 NAME OGDEN, SHARON D.
1.3 STREET ADDRESS 4614 NW 53rd STREET
1.4 CITY-STATE-ZIP GAINESVILLE, FL 32606

☐ Change

☒ Addition

TITLE V
NAME PECK, AMMON B DR
STREET ADDRESS 9311 SW 43RD LANE
CITY-STATE-ZIP GAINESVILLE FL

☐ DELETE

2.1 TITLE V
2.2 NAME TEDESCO, JOHN L.
2.3 STREET ADDRESS 542 BLACKHORSE ROAD
2.4 CITY-STATE-ZIP CHESTER SPRINGS, PA 19425

☐ Change

☒ Addition

TITLE ST
NAME TREW, MARY
STREET ADDRESS 9922 SW 41ST ROAD
CITY-STATE-ZIP GAINESVILLE FL

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

☐ Change

☐ Addition

TITLE PD
NAME PECK, DAVID C
STREET ADDRESS 115 GOLFVIEW
CITY-STATE-ZIP HOMASASSA FL

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

☐ Change

☐ Addition

TITLE D
NAME MARGULIES, DAVID M.
STREET ADDRESS 59 PINE RIDGE ROAD
CITY-STATE-ZIP NAUTON MA

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP NEWTON, MA

☒ Change

☐ Addition

TITLE D
NAME VINCENT P MIHALIK
STREET ADDRESS 915 HAGUE ROAD
CITY-STATE-ZIP INDIANAPOLIS IN

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP Tripolis Bldg. 100 Burgerweeshuispad 14
NL-1076 EW Amsterdam, Netherlands

☒ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WEAVER H. GAINES

CHAIRMAN & CEO

4/1/97

904-462-3961

Date Daytime Phone #