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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000004897**1. Corporation Name

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90056 039 ***150.00

CIVIGEN	ICS, INC.						
Principal Place	e of Business	Mailing Address				A BOURD DURING BOILD WINDS HOLD	SA TASU SANI SANI
100 LOCKE DR MARLBOROUGH MA 01752 US 100 LOCKE DR MARLBOROUGH MA 01752 US				DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualified		
2 5		2a. Mailing Address			10/10/1995 4. FEI Number		Applied For
- , '	lace of Business	 1			1		Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.				04-3266429	\$8.75	Additional	
22 27					5. Certifcate of Status Desired	1 1	Required
City & Stat	e ·	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28		Trust Fund Contribution	1 1	to Fees	
Zip	Country	Zip	Country	**	8. This corporation owes the curre	ent year Intangible	
24	25	29	30		Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New R	egistered Agent	
			81	Name			
C T CORPORATION SYSTEM				Street Addr	ess (P.O. Box Number is Not Accepta	ble)	
1200 SOUTH PINE ISLAND ROAD							
PLAI	NTATION FL 33324	•	83				
	the profit of the second		84	City	·	FL 85 Zip	Code
44 5	to the environment Sections 607 050	22 and 607 1509 Florida Statutos	the above	named corn	oration submits this statement for the	numose of changing it	ts registered
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au	thorized by tr	ne corporatio	n's board of directors. I hereby accep	t the appointment as i	egistered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: I	Registered Agent :	signature required	when reinstating)	DATE	
12.	OFFICERS At	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		
TITLE	D DELETE		1.1 TITLE		ease see attached list a	σ ← □Change	Addition
NAME	GALEA, ROBERT P		1.2 NAME		officers & directors		
STREET ADDRESS	2805 BERING ST		1.3 STREET ADDRESS				
CITY-ST-ZIP	ANCHORAGE AK 99503		1.4 CITY-ST-	ZIP			
TITLE	D	☐ DELETE	2.1 TITLE			Change	e 🗌 Addition
NAME	JOHNSON, JAMES	HNSON, JAMES		<u> </u>			
STREET ADDRESS	SS 233 S WACKER DR		2.3 STREET ADDRESS				
CITY-ST-ZIP	CHICAGO IL 60606		2. 4 CITY-ST-	-ZIP ·		C Change	. Maddition
TITLE	,		3.1 TITLE			Change	e 🗌 Addition
NAME	GILL, JOSEPH B		3.2 NAME				
STREET ADDRESS			3.3 STREET A				
CITY-ST-ZIP	SOUTHBORO MA 01772	— — — — —	3.4. CITY-ST	ZIP		Change	e
TITLE	AC	☐ DELETE	4.1 TITLE	}			, CAUGUE
NAME	ANGELINI, MICHAEL P		4, 2 NAME				
STREET ADDRESS	, 0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		4.3 STREET A	- 1			
CITY-ST-ZIP	WORCESTER MA 01608	O sector	4.4 CITY-ST-			Change	e Addition
πLE	PD	_ ☐ DELETE	5.1 TITLE 5.2 NAME	PD	ss, Roy I.	Change	, Fil voquiqui
NAME	ROSS, ROY I.		5.2 NAME 5.3 STREET A	DODEC IAA	Locke Drive		
STREET ADDRESS					riborough, MA 01752		
CITY-ST-ZIP	MILFORD MA 01757	□ nerete	5.4 C/TY-ST- 6.1 T/TLE	ZIP F(Q	Holowyn, 14 olisa	☐ Change	e 🖺 Addition
TITLE	D	☐ DELETE	6.1 MILE				,
NAME	NICKLEN, OLIVER		6.3 STREET	innaece			
STREET ADDRESS	OSS & WACKED DD	,	0.3 3 LKEE 1 V	ADDVESO			

6.4 CITY-ST-ZIP

14. I 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 angual 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 highanged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ATOTALE REQUIRED ROBOTE E. Kinney

2-8-99

Daytime Phone #

R2E034 (11/98)

247662-40056-37 F95000004897

EPSLur

CiviGenics, Inc.

DIRECTORS

Roy I. Ross 100 Locke Drive President

Marlborough, MA 01752

Joseph B. Gill 22 High Street

Southboro, MA 01772

Oliver Nicklin 233 South Wacker Drive

Chicago, IL 60606

James Johnson 233 South Wacker Drive

Chicago, IL 60606

Joan McArdle 420 Boylston Street

Boston, MA 02116

Robert Galea 2805 Bering Street

Anchorage, AK 99503

Pierre Marc Johnson 1250, boul. Rene-Levesque Ouest

Bureau 2500

Montreal, PQ Canada H3B 4Y1

OFFICERS

Roy I. Ross 100 Locke Drive President

Marlborough, MA 01752

Southboro, MA 01772

Joseph B. Gill

22 High Street

Treasurer

Robert E. Kinney

100 Locke Drive Marlborough, MA 01752

Assistant Treasurer and Clerk/CFO

Michael P. Angelini

311 Main Street

Assistant Clerk

Susan Rayne

161 Worcester Road

Worcester, MA 01608

Assistant Clerk

Framingham, MA 01701

Samuel Sacco

100 Locke Drive

Assistant Clerk

Marlborough, MA 01752