

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90054 022 ***150.00

DOCUMENT # **F99000000431**

1. Entity Name

Thermo Noran Inc.

DO NOT WRITE IN THIS SPACE

653279

2. Principal Place of Business

2551 W Bethline Hwy
Suite, Apt. # etc.

3. Mailing Address

81 Wyman Street
Suite, Apt. # etc.

DO NOT WRITE IN THIS SPACE

City & State

Middleton

City & State

Waltham

4. FEI Number

39-1808027

Applied For

Not Applicable

Zip

WI

County

53562

Zip

MA

Country

02454

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name **CT Corporation System**

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Rd.

City **Plantation**

FL

Zip Code **33324**

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature of principal officer, director, or registered agent and date of filing.

NOTE: Registered Agent Signature required when changing.

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$650.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President / Dir
NAME	Robert W Arnold
STREET ADDRESS	2551 W Bethline Hwy
CITY-STATE-ZIP	Middleton WI 53562
TITLE	Treasurer
NAME	Kenneth J Apicecno
STREET ADDRESS	81 Wyman Street
CITY-STATE-ZIP	Waltham, MA 02454
TITLE	Secretary
NAME	Seth Hoogasian
STREET ADDRESS	81 Wyman Street
CITY-STATE-ZIP	Waltham MA 02454
TITLE	Asst. Secretary
NAME	Robert V Aghababian
STREET ADDRESS	81 Wyman Street
CITY-STATE-ZIP	Waltham MA 02454
TITLE	Director
NAME	Marigh E Dekkers
STREET ADDRESS	81 Wyman Street
CITY-STATE-ZIP	Waltham MA 02454
TITLE	
NAME	
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CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or on an attachment with addresses, with all other fees empowered.

SIGNATURE:

Robert V Aghababian

Robert V Aghababian

4-26-02 781-622-1000

SIGNATURE AND FULL OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone Number

CR2E034B (12/01)