

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002380

FILED
May 03, 2007
Secretary of State

Entity Name: NEWGEN RESULTS CORPORATION

Current Principal Place of Business:

10243 GENETIC CENTER DR
SAN DIEGO, CA 92121

New Principal Place of Business:

Current Mailing Address:

10243 GENETIC CENTER DR
SAN DIEGO, CA 92121

New Mailing Address:

FEI Number: 33-0604378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: LACEY, DENNIS
Address: 9197 S PEORIA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: D () Delete
Name: O'CONNOR, CHRISTY T.
Address: 9197 S. PEORIA STREET
City-St-Zip: ENGLEWOOD, CO 80112

Title: P () Delete
Name: POWELL, DANIEL
Address: 10243 GENETIC CENTER DRIVE
City-St-Zip: SAN DIEGO, CA 92121

Title: S () Delete
Name: O'CONNOR, CHRISTY
Address: 9197 S PEORIA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: C () Delete
Name: HIGGINS, JOE
Address: 9197 S. PEORIA STREET
City-St-Zip: ENGLEWOOD, CO 80112

Title: T () Delete
Name: BREEN, KAREN
Address: 9197 S. PEORIA ST.
City-St-Zip: ENGLEWOOD, CO 80112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DELANEY, BRIAN
Address: 9197 S PEORIA ST
City-St-Zip: ENGLEWOOD, CO 80112

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: () 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: CHRISTY O'CONNOR

S

05/03/2007

Electronic Signature of Signing Officer or Director

Date