2000 UNIFORM BUSINESS REPORT (UBR)				FILED			
DOCUMENT # F9900000 3763 1. Entity Name Applied Genetics, Inc.				Mar 04, 2000 8:00 am Secretary of State			
Applied Genetics, +					:000 90006 01		
Principal Place of Business 1524 South IH 35,	Mailing Address Suite 200						
Austin, Tx 78704							
2. Principal Place of Business 1524 3. TH 35	ce of Business 3. Mailing Address 15245. T. H. 35			B0021688			
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite 200			DO NOT WRITE IN THIS SPACE			
City & State Hustin , Tx	City & State AUSTIA	TX	4.	FEI Number 74-24146		Not	Applicable
78709 Country 6. Name and Address of Current	78704	Country		Certificate of Status Desired	Fee	.75 Additi	ional
Corporation Service		Name		Name and Address of New	Registered Age		
1201 Hays Street			eet Address (P.O. Box Number is Not Acceptable)				
Tallahassee, Fbrida	ahassee, Florida 32301-2525			FL Zip Code			
8. The above named entity submits this statement for	or the purpose of changing its re	egistered office of	r registered aç	gent, or both, in the State of	Florida.		
Signature, typed or printed name of registered agen	and title if applicable. (NOTE: I	Registered Agent signat	ure required when r	einstating)	DATE		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	FILE NOW!!! After MAY 1, 2000 Make Check Payable	医乳头畸形 化环状形 化磺基酚 化氯化铵	550.00	10. Election Campaign Trust Fund Contribu		\$5.00 Added t	May Be
11. OFFICERS AND	——————————————————————————————————————	12.	77	DDITIONS/CHANGES TO O	Γ-		IN 11 Addition §
NAME Tangenson Konald:	I have	NAME STREET ADDRESS CITY-ST-ZIP	Jerom 1524 : Husti	e McCombs, Phi South IH 35# n TX 28709	₹00		707 700 100
NAME Young Robert 5.	Dolete Eur	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert 98 S. Aust	A. Mignatti an Jacinto, Bli in, Tx 7871	_		Addition
NAME VISSET, Mark P STREET ADDRESS 126 East 56th 5the CITY-ST-ZIP - New York, NY 1003		THLE NAME STREET ADDRESS CITY-ST-ZIP	CFO Truin 98 Sa HUS	Jon in Jacinto Blua tin. Tx 78			Addition _
TITLE NAME STREET ADDRESS CITY-ST-ZIP SCANSHALE NULL CENTRAL CHARLE CHARL	Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP	me Cl	Joe Carrio	Blud#39 8701	-	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP SCANNING SCHOOL TO SEE THE SEE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7,050	···		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
13. I hereby certify that the information supplied with indicated on this report or supplemental report of the corporation or the receiver or trustee empty changed, or on an attachment with an address.	s true and accurate and that my owered to execute this report as	he exemption states	ave the same	legal effect as if made unde	er oath; that I am a	an officer or	r director
SIGNATURE: SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER OF	DIRECTOR		2/7/99 Bate	(512) 44 Daytim	2 - 4 e Phane #	363