

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055095

FILED
Feb 23, 2007
Secretary of State

Entity Name: NEOGEN TECHNOLOGIES, INC.

Current Principal Place of Business:

4200 NW 120 AVENUE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

4200 NW 120 AVENUE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 01-0606680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROLF, ROGER
4200 NW 120 AVENUE
CORAL SPRINGS, FL 33065 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DANIELS, ABBEY
Address: 1818 NW 126 WAY
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VD () Delete
Name: BIGGIE, JOHN
Address: 3041 NE 48 STREET
City-St-Zip: LIGHTHOUSE PT, FL 33064

Title: VD () Delete
Name: BIGGIE, LYDIA
Address: 3041 NE 48 STREET
City-St-Zip: LIGHTHOUSE PT, FL 33064

Title: VD () Delete
Name: PLOTKIN, JACUETTA
Address: 18284 104 TERR SOUTH
City-St-Zip: BOCA RATON, FL 33498

Title: VD () Delete
Name: DAWSON, JOHN
Address: BOX 189 644 SHREWSBURY COMMON AVE
City-St-Zip: SHREWSBURY, PA 17361

Title: STD () Delete
Name: ROLF, ROGER
Address: 1741 NW 95 AVE
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROGER ROLF

STD

02/23/2007

Electronic Signature of Signing Officer or Director

Date