


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90077 036 \*\*\*150.00

|   |  |   |   |  |  |
|---|--|---|---|--|--|
| <b>DOCUMENT # P03000125507</b><br>1. Entity Name<br>GERON, INC.   |  |   |   |   |  |
| Principal Place of Business<br>2658 OAKMONT<br>WESTON, FL 33332   |  |   | Mailing Address<br>2658 OAKMONT<br>WESTON, FL 33332   |  |  |
| 2. Principal Place of Business<br><br>Suite, Apt. #, etc.   |  | 3. Mailing Address<br><br>Suite, Apt. #, etc.                                       |   |  |  |
| City & State  |  | City & State  |   |  |  |
| Zip   | Country  | Zip   | Country   |  |  |
| 6. Name and Address of Current Registered Agent<br><br>SHEPARD & LESKAR, P.A.<br>100 N.W. 70TH AVENUE<br>FIRST FLOOR<br>PLANTATION, FL 33317  |  |   |   | 7. Name and Address of New Registered Agent<br>Name <u>Emanuel, Yost &amp; Assoc.</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>13200 SW 128 Street # F-2</u><br>City <u>Miami</u> <u>FL</u> Zip Code <u>33186</u> |  |
| 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. I am familiar with, and accept the obligations of registered agent. |  |   |   |  |  |
| SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>  |  |   |   |  |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee will be \$550.00</b>   |  | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |   | <b>\$5.00</b> May Be<br>Added to Fees  |  |
| 10. OFFICERS AND DIRECTORS  |  |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D<br>AGRESS, RONALD<br>2658 OAKMONT<br>WESTON, FL 33332                      |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Delete  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D<br>KEUTHAN, GERALD<br>2500 NORTH POWERLINE ROAD<br>POMPANO BEACH, FL 33069 |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
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01242006 Chg-P CR2E034 (11/05)

4. FEI Number  
**86-1088578**  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

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2658 OAKMONT  
WESTON, FL 33332

☐ Delete

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2500 NORTH POWERLINE ROAD  
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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald Agress

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-06

Date

954-217-8685

Daytime Phone #