

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P11115**

**(3)**

1. Corporation Name

**ISK BIOSCIENCES CORPORATION**

Principal Place of Business

**5966 HEISLEY ROAD  
P.O. BOX 8000  
MENTOR OH 44061-5000**

Mailing Address

**5966 HEISLEY ROAD  
P.O. BOX 8000  
MENTOR OH 44061-5000**

3. Date Incorporated or Qualified  
**08/12/1986**

3a. Date of Last Report  
**02/08/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

**34-1507195**

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional  
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be  
Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**INGRAM, DAVID M  
GABLES CORPORATE PLAZA, SUITE 1000  
2100 PONCE DE LEON BLVD.  
CORAL GABLES FL 33134**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VP** ☐ DELETE  
NAME **DEROLF, LARRY D.**  
STREET ADDRESS **5966 HEISLEY ROAD**  
CITY-STATE-ZIP **MENTOR OH**

TITLE **VP** ☐ DELETE  
NAME **PETERS, HOWARD**  
STREET ADDRESS **2239 HADEN ROAD**  
CITY-STATE-ZIP **HOUSTON TX**

TITLE **S** ☐ DELETE  
NAME **ANDREWS, R. CRAIG**  
STREET ADDRESS **5966 HEISLEY ROAD**  
CITY-STATE-ZIP **MENTOR OH**

TITLE **TV** ☐ DELETE  
NAME **HICKS, FRANK O.**  
STREET ADDRESS **5966 HEISLEY ROAD**  
CITY-STATE-ZIP **MENTOR OH**

TITLE **CD** ☐ DELETE  
NAME **BARRY, FRANKLIN S.**  
STREET ADDRESS **5966 HEISLEY ROAD**  
CITY-STATE-ZIP **MENTOR OH**

TITLE **V** ☐ DELETE  
NAME **MADISON, ROBERT H.**  
STREET ADDRESS **5966 HEISLEY RD.**  
CITY-STATE-ZIP **MENTOR OH**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President/Director** ☐ Change ☒ Addition  
1.2 NAME **Urbanowski, Richard L.**  
1.3 STREET ADDRESS **5966 Heisley Road**  
1.4 CITY-STATE-ZIP **Mentor, OH 44060**

2.1 TITLE **Vice President** ☐ Change ☒ Addition  
2.2 NAME **Eilrich, Gary L.**  
2.3 STREET ADDRESS **5966 Heisley Road**  
2.4 CITY-STATE-ZIP **Mentor, OH 44060**

3.1 TITLE **Vice President** ☐ Change ☒ Addition  
3.2 NAME **J. Neal Butler**  
3.3 STREET ADDRESS **1523 Johnson Ferry Road, Suite 250**  
3.4 CITY-STATE-ZIP **Marietta, GA 30062**

4.1 TITLE **Vice President** ☐ Change ☒ Addition  
4.2 NAME **J. A. Ignatoski**  
4.3 STREET ADDRESS **6075 Poplar Avenue, Suite 306**  
4.4 CITY-STATE-ZIP **Memphis, TN 38119**

5.1 TITLE **Business Director** ☐ Change ☒ Addition  
5.2 NAME **M. Mizoi**  
5.3 STREET ADDRESS **10-30 Fujimi 2-Chome**  
5.4 CITY-STATE-ZIP **Chiyoda-ku, Tokyo 102, Japan**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**R. Craig Andrews, Secretary**

**4/9/96**

Date

**216/357-4172**

Daytime Phone #

CR2E034 (12/95)

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## ISK BIOSCIENCES CORPORATION

<u>OFFICERS</u>	<u>TITLE</u>	<u>ADDRESS</u>
F. S. Barry, Jr.	Chairman of the Board/ Director	5966 Heisley Road, P. O. Box 8000, Mentor, OH 44061-8000
R. L. Urbanowski	President/ Director	5966 Heisley Road, P. O. Box 8000, Mentor, OH 44061-8000
R. C. Andrews	Secretary	5966 Heisley Road, P. O. Box 8000, Mentor, OH 44061-8000
F. O. Hicks	Vice President/ Treasurer	5966 Heisley Road, P. O. Box 8000, Mentor, OH 44061-8000
J. N. Butler	Vice President	1523 Johnson Ferry Road, Suite 250, Marietta, GA 30062
G. L. Eilrich	Vice President	5966 Heisley Road, P. O. Box 8000, Mentor, OH 44061-8000
L. D. DeRolf	Vice President	5966 Heisley Road, P. O. Box 8000, Mentor, OH 44061-8000
J. A. Ignatoski	Vice President	6075 Poplar Avenue, Suite 306, Memphis, TN 38119
R. H. Madison	Vice President	5966 Heisley Road, P. O. Box 8000, Mentor, OH 44061-8000
H. Peters	Vice President	5966 Heisley Road, P. O. Box 8000, Mentor, OH 44061-8000
M. Mizoi	Business Director	10-30 Fujimi 2-Chome, Chiyoda-ku, Tokyo 102, Japan