FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 11 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 (5)DOCUMENT # CALIPER, INC. OF VIRGINIA Mailing Address Principal Place of Business P O BOX 2574 512 CENTRAL DR VIRGINIA BEACH VA 23450-574 VIRGINIA BEACH VA 23454 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/05/1989 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 54-1255229 Not Applicable Sulte, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Zw Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CORPORATION INFORMATION SERVICES, INC. 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 Zip Code 84 City 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, typod or printed nack of registered open) and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE 1.1 TITLE TITLE GREEN, ROBERT Y., JR. NAME 1.2 NAME 932 E. HORSESHOE COURT 1.3 STREET ADDRESS STREET ADDRESS VIRGINIA BEACH VA 1.4 C/TY - ST - 7/P CITY-ST-ZIP ☐ Addition Change DELETE 21 TITLE TITLE SPEAS, HERBERT T., JR. 2.2 NAME NAME 932 E. HORSESHOE COURT 2.3 STREET ADDRESS STREET ADDRESS VIRGINIA BEACH VA CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS DORESS 3.4. CITY - \$1 - ZIP ST-ZIP Change Addition DELETE 4.1 TITLE 4 2 NAME 4.3 STREET ADDRESS TRESS 4.4 CITY - ST - ZIP -ST-ZIP Change Addition ■ DELETE 5.1 TITLE ..₽ 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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. nl and Maple

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP