

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P36488

**FILED**  
**Dec 09, 2011**  
**Secretary of State**

**Entity Name:** LABORATORY SUPPLY COMPANY

**Current Principal Place of Business:**

3069 MERCURY RD  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 9289  
LOUISVILLE, KY 40209 US

**New Mailing Address:**

250 OTTAWA AVENUE  
LOUISVILLE, KY 40217

**FEI Number:** 61-0732657

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C T CORPORATION SYSTEM

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: DAVIS, CHARLES E SR  
Address: 250 OTTAWA AVENUE  
City-St-Zip: LOUISVILLE, KY 40217

Title: DST  
Name: DAVIS, CHARLES E JR  
Address: 250 OTTAWA AVENUE  
City-St-Zip: LOUISVILLE, KY 40217

Title: PRES  
Name: ECKERT, DANIEL A  
Address: 250 OTTAWA AVENUE  
City-St-Zip: LOUISVILLE, KY 40217

I hereby 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 all other like empowered.

SIGNATURE: DANIEL A. ECKERT

PRES

12/09/2011

Electronic Signature of Signing Officer or Director

Date