2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2012
Secretary of State

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Entity Name: MORPHOGENESIS, INC.

Current Principal Place of Business:

2203 N LOIS AVENUE
SUITE 900
TAMPA, FL 33607 US

New Principal Place of Business:

4613 N CLARK AVENUE
TAMPA, FL 33614 US

Current Mailing Address:

2203 N LOIS AVENUE
SUITE 900
TAMPA, FL 33607 US

New Mailing Address:

4613 N CLARK AVENUE
TAMPA, FL 33614 US

FEI Number: 59-3359711 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAWMAN, MICHAEL J.P.
10019 BRADWELL PLACE
TAMPA, FL 33626 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

OFFICERS AND DIRECTORS:

Title: PC
Name: LAWMAN, MICHAEL
Address: 10019 BRADWELL PLACE
City-St-Zip: TAMPA, FL 33626 US

Title: CEO
Name: LAWMAN, PATRICIA
Address: 10019 BRADWELL PLACE
City-St-Zip: TAMPA, FL 33626 US

Title: D
Name: SCANLAN, JOSEPH
Address: 1117 PINELLAS BAYWAY SOUTH
City-St-Zip: TIERRA VERDE, FL 33715 US

Title: D
Name: LAWMAN, DAVID
Address: KEMBLE HOUSE, THE SPINNEY LARCH AVE.
City-St-Zip: SUNNINGDALE, UK SL5 0AS UK

Title: D
Name: COOK, GRAHAME
Address: 9 ALLEYN ROAD
City-St-Zip: DULWICH, UK SE21 8AB UK

Title: D
Name: HARGREAVES, BRIAN
Address: 39 BUCKLAND CRESCENT
City-St-Zip: LONDON, UK NW3 5DJ UK

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: PATRICIA LAWMAN CEO 04/11/2012

Electronic Signature of Signing Officer or Director Date