

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000062630

Entity Name: DULANEY TOXICOLOGY, INC.

**FILED**  
**Mar 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7133 HERITAGE RIDGE RD.  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

7133 HERITAGE RIDGE RD.  
TALLAHASSEE, FL 32312

**New Mailing Address:**

FEI Number: 59-3526299

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DULANEY, MARLAND D JR.  
7133 HERITAGE RIDGE RD.  
TALLAHASSEE, FL 32312 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: P  
Name: DULANEY, MARLAND D JR.  
Address: 7133 HERITAGE RIDGE RD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: M  
Name: DULANEY, PATRICIA B  
Address: 7133 HERITAGE RIDGE RD  
City-St-Zip: TALLAHASSEE, FL 32312

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: MARLAND D DULANEY

P

03/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date