

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004484

FILED  
Apr 21, 2010  
Secretary of State

Entity Name: CSL PLASMA INC.

**Current Principal Place of Business:**

5201 CONGRESS AVE  
SUITE 220  
BOCA RATON, FL 33487 US

**New Principal Place of Business:**

**Current Mailing Address:**

1020 FIRST AVE  
P.O. BOX 61501, ATTN: TAX DEPT.  
KING OF PRUSSIA, PA 19406 US

**New Mailing Address:**

FEI Number: 74-2967974      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: TURNER, PETER  
Address: 1020 FIRST AVE  
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: D  
Name: CIPA, ANTONI  
Address: 45 POPLAR ROAK  
City-St-Zip: PARKVILLE,VICTORIA,AUSTRALIA,

Title: PD  
Name: NAYLOR, GORDON  
Address: 5201 CONGRESS AVE., STE. 220  
City-St-Zip: BOCA RATON, FL 33487

Title: D  
Name: MCNAMEE, BRIAN  
Address: 45 POPLAR ROAK  
City-St-Zip: PARKVILLE,VICTORIA,AUSTRALIA,

Title: S  
Name: BOSS, GREGORY  
Address: 1020 FIRST AVE  
City-St-Zip: KING OF PRUSSIA, PA 19406

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: GREGORY BOSS

SECR

04/21/2010

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

\_\_\_\_\_ Date