

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000001211

Entity Name: CLINICAL AND TRANSLATIONAL GENOME RESEARCH
INSTITUTE, INC.

FILED
May 04, 2016
Secretary of State
CC8639422359

Current Principal Place of Business:

6900 DANIELS PARKWAY
29-303
FORT MYERS, FL 33912

Current Mailing Address:

6900 DANIELS PARKWAY
29-303
FORT MYERS, FL 33912 US

FEI Number: 45-4431954

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HANDLEY, DAN
6900 DANIELS PARKWAY
29-303
FORT MYERS, FL 33912 US

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: DAN HANDLEY

05/04/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name JACOBS, F. NICHOLAS
Address 6900 DANIELS PARKWAY
29-303
City-State-Zip: FORT MYERS FL 33912

Title STD
Name KROCHUK, TIM
Address 6900 DANIELS PARKWAY
29-303
City-State-Zip: FORT MYERS FL 33912

Title CD
Name DALGARD, CLIFF
Address 6900 DANIELS PARKWAY
29-303
City-State-Zip: FORT MYERS FL 33912

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TIMOTHY A KROCHUK

SECRETARY/TREASURER 05/04/2016

Electronic Signature of Signing Officer/Director Detail

Date