2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2015
Secretary of State
CC5961828436

DOCUMENT# F08000001993

Entity Name: PERKINELMER GENETICS, INC.

Current Principal Place of Business:

90 EMERSON LANE, SUITE 1403
ATTN: J. PEARL
BRIDGEVILLE, PA 15017

Current Mailing Address:

940 WINTER STREET
ATTN: J. PEARL
WALTHAM, MA 02451

FEI Number: 25-1645804

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR, SECRETARY, VP
Name	HEALY, JOHN L
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451

Title	PRESIDENT
Name	SINGH, PRAHLAD R.
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451

Title	ASSISTANT SECRETARY
Name	BORANDI, PETER J.
Address	90 EMERSON LANE
City-State-Zip:	BRIDGEVILLE PA 15017

Title	VP
Name	ADAMS, DREW C.
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451

Title	DIRECTOR, TREASURER
Name	FRANCISCO, DAVID C
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451

Title	VPAS
Name	POTTHOFF, MARY E
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451

Title	AS
Name	KEEGAN, KRISTINA F
Address	710 BRIDGEPORT AVE
City-State-Zip:	SHELTON CT 06484

Title	VP
Name	LETCHER, JOHN R.
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451

Continues on page 2

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: JOHN L. HEALY SECRETARY 03/23/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	ASST. SECRETARY
Name	OLIVER, KEVIN A.
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451

Title	VP
Name	WRAY, LARRY K.
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451

Title	ASSISTANT TREASURER
Name	BOEHK, CHRISTIAN M.
Address	710 BRIDGEPORT AVENUE
City-State-Zip:	SHELTON CT 06484

Title	ASSISTANT SECRETARY
Name	CATALANO, DIANA M.
Address	940 WINTER STREET
City-State-Zip:	WALTHAM MA 02451