

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F23000006214

Entity Name: BIOSPATIAL, INC.

**Current Principal Place of Business:**

4819 EMPEROR BOULEVARD, SUITE 400  
DURHAM, NC 27703

**Current Mailing Address:**

4819 EMPEROR BOULEVARD, SUITE 400  
DURHAM, NC 27703 US

FEI Number: 81-4599753

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 D  
Name GARDNER, DAVID  
Address 4819 EMPEROR BOULEVARD, SUITE 400  
City-State-Zip: DURHAM NC 27703

Title D  
Name JONES, DAVID  
Address 4819 EMPEROR BOULEVARD, SUITE 400  
City-State-Zip: DURHAM NC 27703

Title D  
Name RUNKLE, PAUL  
Address 4819 EMPEROR BOULEVARD, SUITE 400  
City-State-Zip: DURHAM NC 27703

Title DCEO  
Name WOODWORTH, JONATHAN  
Address 4819 EMPEROR BOULEVARD, SUITE 400  
City-State-Zip: DURHAM NC 27703

Title CTO  
Name LUNSFORD, CHRISTOPHER B  
Address 4819 EMPEROR BOULEVARD, SUITE 400  
City-State-Zip: DURHAM NC 27703

Title COO  
Name WALTERS, JOSHUA  
Address 4819 EMPEROR BOULEVARD, SUITE 400  
City-State-Zip: DURHAM NC 27703

*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: JONATHAN WOODWORTH

CEO

04/10/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date