# 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004380

Entity Name: BECKMAN COULTER GENOMICS INC.

### **Current Principal Place of Business:**

36 CHERRY HILL DRIVE DANVERS, MA 01923

### **Current Mailing Address:**

36 CHERRY HILL DRIVE DANVERS, MA 01923 US

# FEI Number: 94-3448514

### 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

### **Officer/Director Detail :**

| Title           | DIRECTOR                                 | Title           | DIRECTOR                                 |
|-----------------|--|-----------------|--|
| Name            | LUTZ, ROBERT S.                          | Name            | MCFADEN, FRANK T.                        |
| Address         | 2200 PENNSYLVANIA AVE., NW SUITE<br>800W | Address         | 2200 PENNSYLVANIA AVE., NW SUITE<br>800W |
| City-State-Zip: | WASHINGTON DC 20037                      | City-State-Zip: | WASHINGTON DC 20037                      |
|                 |  |                 |  |
| Title           | PRESIDENT                                | Title           | SECRETARY                                |
| Name            | SWEENEY, JOHN                            | Name            | O'REILLY, JAMES F.                       |
| Address         | 36 CHERRY HILL DRIVE                     | Address         | 2200 PENNSYLVANIA AVE., NW SUITE<br>800W |
| City-State-Zip: | DANVERS MA 01923                         | City-State-Zip: | WASHINGTON DC 20037                      |
| Title           | TREASURER                                |                 |  |
| Name            | MCFADEN, FRANK T.                        |                 |  |
| Address         | 2200 PENNSYLVANIA AVE., NW SUITE<br>800W |                 |  |
| City-State-Zip: | WASHINGTON DC 20037                      |                 |  |

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: FRANK T. MCFADEN

TREASURER

04/04/2018

Electronic Signature of Signing Officer/Director Detail



Date

Certificate of Status Desired: No