

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000005286

**Entity Name:** PATERNITY TESTING CORPORATION

**Current Principal Place of Business:**

300 PORTLAND STREET  
SUITE 300  
COLUMBIA, MO 65201

**Current Mailing Address:**

300 PORTLAND STREET  
SUITE 300  
COLUMBIA, MO 65201 US

**FEI Number:** 43-1746960

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
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 PCHR  
Name GORMAN, KIM  
Address 1214 DANFORTH DR.  
City-State-Zip: COLUMBIA MO 65201

Title VCHR  
Name BECKWITH, MICHELLE  
Address 1557 COUNTY ROAD 256  
City-State-Zip: COLUMBIA MO 65201

Title SD  
Name GORMAN, JOSEPH  
Address 1214 DANFORTH DRIVE  
City-State-Zip: COLUMBIA MO 65201

Title T  
Name BECKWITH, JOHNNIE  
Address 1557 COUNTY ROAD 256  
City-State-Zip: COLUMBIA MO 65201

*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:** JOHNNIE BECKWITH

**TREASURER**

**03/14/2019**

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

\_\_\_\_\_  
Date