

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F23000003117

**Entity Name:** EUROFINS PANLABS, INC.**Current Principal Place of Business:**15 RESEARCH PARK DRIVE,  
ST. CHARLES, MO 63304**Current Mailing Address:**6 RESEARCH PARK DRIVE  
ST CHARLES, MO 63304 US**FEI Number: 46-1006817****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC  
115 NORTH CALHOUN STREET, SUITE 4  
TALLAHASSEE, FL 32301 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 AND PRESIDENT  
Name BODE, JACOB  
Address 13715 RIDER TRAIL NORTH  
City-State-Zip: ST. LOUIS MO 63045

Title CHR  
Name SHASSERRE, CHRISTINA  
Address 13715 RIDER TRAIL NORTH  
City-State-Zip: ST. LOUIS MO 63045

Title TREASURER  
Name DICKINSON, DAN  
Address 2200 RITTENHOUSE ST  
SUITE A  
City-State-Zip: DES MOINES IA 50312

Title TD  
Name DUDAS, JUSTIN  
Address 343 WEST MAIN ST  
City-State-Zip: LEOLA PA 17540

Title SECRETARY  
Name KENYON, AMBER  
Address 343 WEST MAIN STREET  
City-State-Zip: LEOLA PA 17540

*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: DAN DICKINSON****TREASURER****04/10/2024**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date