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**Apr 16 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000003414 (7)

1. Corporation Name
DADE MICROSCAN INC.



Principal Place of Business 1584 ENTERPRISE BLVD W SACRAMENTO CA 95691	Mailing Address 1584 ENTERPRISE BLVD W SACRAMENTO CA 95691 3422 SEE BELOW
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3. Date incorporated or Qualified 07/05/1996	3a. Date of Last Report
4. FEI Number 36-3991686	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 TAX DEPARTMENT PO BOX 780
22 City & State	27 1717 DEERFIELD ROAD DEERFIELD, IL 60015-0780
23 Zip	28
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signatures, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	GARRETT, SCOTT T	
STREET ADDRESS	1717 DEERFIELD RD	
CITY-ST-ZIP	DEERFIELD IL 60015	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DUFFEY, JOHN M	
STREET ADDRESS	1717 DEERFIELD RD	
CITY-ST-ZIP	DEERFIELD IL 60015	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BUCKLO, MICHAEL P	
STREET ADDRESS	1717 DEERFIELD RD	
CITY-ST-ZIP	DEERFIELD IL 60015	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KIRSCH, ADAM	
STREET ADDRESS	1717 DEERFIELD RD	
CITY-ST-ZIP	DEERFIELD IL 60015	
TITLE	D	<input type="checkbox"/> DELETE
NAME	NUNNELLY, MARK E	
STREET ADDRESS	1717 DEERFIELD RD	
CITY-ST-ZIP	DEERFIELD IL 60015	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	TREASURER NANCY A. KRZSA
6.3 STREET ADDRESS	1717 DEERFIELD RD
6.4 CITY-ST-ZIP	DEERFIELD IL 60015-0780

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John M. Duffey* **REQUIRED** **John M. Duffey** Vice President **4/17/97** (847) 267-5395

CR2E034 (9/96)

**DADE MICROSCAN INC.
OFFICERS AND DIRECTORS**

**F.E.I.N.: 36-3991686
Incorporated: 11/23/94**

OFFICERS

Scott T. Garrett	President
Adam Kirsch	Vice President & Asst. Secretary
Mark E. Nunnally	Vice President & Asst. Secretary
John P. Connaughton	Vice President & Asst. Secretary
Marc N. Casper	Vice President & Asst. Secretary
James Godsey	Vice President
Robert A. Boghosian	Vice President
John M. Duffey	Vice President
James Reid-Anderson	Vice President
Ricky O. Lee	Vice President
Nancy A. Krejsa	Treasurer
Michael P. Bucklo	Secretary
Louise S. Pearson	Asst. Secretary
Joseph A. Nigro, Jr.	Asst. Secretary

DIRECTORS

Scott T. Garrett
John P. Connaughton
Mark E. Nunnally

The mailing address of all officers and directors of Dade Microscan Inc. is:

1717 Deerfield Road
PO Box 780
Deerfield, Illinois 60015-0780
(847)267-5300