

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24053

Entity Name: GELMAN SCIENCES INC.**Current Principal Place of Business:**600 SOUTH WAGNER RD
ANN ARBOR
MICHIGAN,, DC 48103**Current Mailing Address:**25 HARBOR PARK DRIVE
PORT WASHINGTON, NY 11050 US**FEI Number:** 38-1614806**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 VP, SECRETARY
Name JAMES, O'REILLY,
Address 2200 PENNSYLVANIA AVE.,
NW SUITE 800W,
City-State-Zip: WASHINGTON, DC 20037

Title VP
Name FRANK, MCFADEN,
Address 2200 PENNSYLVANIA AVE.,
NW SUITE 800W,
City-State-Zip: WASHINGTON, DC 20037

Title VP
Name JEFFREY, FIGG,
Address 600 SOUTH WAGNER RD
ANN ARBOR
City-State-Zip: MICHIGAN, DC 48103

Title PRESIDENT
Name JENNIFER, HONEYCUTT,
Address 600 SOUTH WAGNER RD
ANN ARBOR
City-State-Zip: MICHIGAN, DC 48103

Title TREASURER
Name FRANK, MCFADEN,
Address 2200 PENNSYLVANIA AVE.,
NW SUITE 800W,
City-State-Zip: WASHINGTON, DC 20037

Title VP
Name ROBERT, LUTZ,
Address 2200 PENNSYLVANIA AVE.,
NW SUITE 800W,
City-State-Zip: WASHINGTON, DC 20037

Title VP
Name BRETT, CORNELL
Address 2200 PENNSYLVANIA AVE.,
NW SUITE 800W,
City-State-Zip: WASHINGTON, DC 20037

Title ASSISTANT SECRETARY
Name LAURA, FINK,
Address 600 SOUTH WAGNER RD
ANN ARBOR
City-State-Zip: MICHIGAN, DC 48103

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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: MCFADEN, FRANK

TREASURER

04/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name CATHLEEN, COLVIN,
Address 600 SOUTH WAGNER RD
ANN ARBOR
City-State-Zip: MICHIGAN, DC 48103

Title DIRECTOR
Name ROBERT, LUTZ,
Address 2200 PENNSYLVANIA AVE.,
NW SUITE 800W,
City-State-Zip: WASHINGTON, DC 20037

Title DIRECTOR
Name FRANK, MCFADEN,
Address 2200 PENNSYLVANIA AVE.,
NW SUITE 800W,
City-State-Zip: WASHINGTON, DC 20037