

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36488

Entity Name: LABORATORY SUPPLY COMPANY

Current Principal Place of Business:

250 OTTAWA AVE
LOUISVILLE, KY 40209

Current Mailing Address:

250 OTTAWA AVE
LOUISVILLE, KY 40209 US

FEI Number: 61-0732657

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	CEO, DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	NIELSEN, STEVEN	Name	ECKERT, DAN
Address	250 OTTAWA AVE	Address	250 OTTAWA AVE
City-State-Zip:	LOUISVILLE KY 40209	City-State-Zip:	LOUISVILLE KY 40209
Title	SECRETARY, TREASURER	Title	CONTROLLER
Name	WILLETT, GEORGE	Name	BLACK, LINDA
Address	250 OTTAWA AVE	Address	250 OTTAWA AVE
City-State-Zip:	LOUISVILLE KY 40209	City-State-Zip:	LOUISVILLE KY 40209

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: LINDA BLACK

CONTROLLER

04/12/2014

Electronic Signature of Signing Officer/Director Detail

Date