

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212537327

1.) CORPORATION NAME:

PerkinElmer Health Sciences, Inc.

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1608787**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 2,000,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 940 WINTER STREET
Attn: J. Pearl

CITY/ST/ZIP: WALTHAM, MA 02451-1457

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

| | | | |
|-----------------|------------------------|---|-----------------------------------|
| NAME: | ROBERT F FRIEL | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 940 WINTER STREET | | |
| CITY/ST/ZIP/CO: | WALTHAM, MA 02451-1457 | | |

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|-----------------|------------------------|---|--|
| NAME: | JOHN L HEALY | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VP/S | | |
| ADDRESS: | 940 WINTER STREET | | |
| CITY/ST/ZIP/CO: | WALTHAM, MA 02451-1457 | | |

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|-----------------|-------------------|---|-----------------------------------|
| NAME: | DREW C. ADAMS | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 940 WINTER STREET | | |
| CITY/ST/ZIP/CO: | WALTHAM, MA 02451 | | |

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|-----------------|--------------------|---|-----------------------------------|
| NAME: | MICHAEL L. BATTLES | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 940 WINTER STREET | | |
| CITY/ST/ZIP/CO: | WALTHAM, MA 02451 | | |

| | | | |
|-----------------|------------------------|---|-----------------------------------|
| NAME: | RICHARD F. BEGLEY | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 710 BRIDGEPORT AVE | | |
| CITY/ST/ZIP/CO: | SHELTON, CT 06484-4794 | | |

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|-----------------|-------------------|---|-----------------------------------|
| NAME: | JAMES CORBETT | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 940 WINTER STREET | | |
| CITY/ST/ZIP/CO: | WALTHAM, MA 02451 | | |

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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | ALAN FLETCHER VICE PRESIDENT 940 WINTER STREET WALTHAM, MA 02451 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | DAVID A. GEIST VICE PRESIDENT 940 WINTER STREET WALTHAM, MA 02451 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | PAUL LEBLANC VICE PRESIDENT 940 WINTER STREET WALTHAM, MA 02451-1457 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | JOHN LETCHER VICE PRESIDENT 940 WINTER STREET WALTHAM, MA 02451-1457 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | DANIEL R. MARSHAK VICE PRESIDENT 940 WINTER STREET WALTHAM, MA 02451 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | KEVIN A. OLIVER VICE PRESIDENT 940 WINTER STREET WALTHAM, MA 02451 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | DAVID E. PANTAZI VICE PRESIDENT 940 WINTER STREET WALTHAM, MA 02451 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | MARY E. POTTHOFF VICE PRESIDENT 940 WINTER STREET WALTHAM, MA 02451 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | EDWARD F. SZTUKOWSKI VICE PRESIDENT 245 FIRST STREET CAMBRIDGE, MA 02142 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | MAURICE H. TENNEY VICE PRESIDENT 710 BRIDGEPORT AVENUE SHELTON, CT 06484 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | JUDITH A. ALBRECHT ASST SECRETARY 710 BRIDGEPORT AVE SHELTON, CT 06484-4794 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |

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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | DANIEL J. DAUERTY ASST SECRETARY 710 BRIDGEPORT AVENUE SHELTON, CT 06484 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | NATHANAEL M. DAVIS ASST SECRETARY 940 WINTER STREET WALTHAM, MA 02451 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | KRISTINA F. KEEGAN ASST SECRETARY 710 BRIDGEPORT AVENUE SHELTON, CT 06484-4794 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | STEPHEN P. STONE ASST SECRETARY 710 BRIDGEPORT AVE SHELTON, CT 06484-4794 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | DAVID C FRANCISCO TREASURER 940 WINTER ST WALTHAM, MA 02451-1457 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Christian Boehk ASST TREASURER 710 BRIDGEPORT AVE SHELTON, CT 06484-4794 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Bruce Bal VICE PRESIDENT 68 Elm Street Hopkinton, MA 01748 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Nathaniel J. Cospers VICE PRESIDENT 68 Elm Street Hopkinton, MA 01748 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | LeeAnn L. Dennewitz VICE PRESIDENT 402 Regency Court Hockessin, DE 19707 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Joseph H. Griffith IV VICE PRESIDENT 68 Elm Street Hopkinton, MA 01748 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Joel S. Goldberg VICE PRESIDENT 940 Winter Street Waltham, MA 02451 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |

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| NAME: Will Kruka TITLE: VICE PRESIDENT ADDRESS: 68 Elm Street CITY/ST/ZIP/CO: Hopkinton, MA 01748 | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: Mark Roskey TITLE: VICE PRESIDENT ADDRESS: 68 Elm Street CITY/ST/ZIP/CO: Hopkinton, MA 01748 | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: Wael Yared TITLE: VICE PRESIDENT ADDRESS: 549 Albany Street CITY/ST/ZIP/CO: Boston, MA 02118 | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: Lisa A. Fortin TITLE: ASST SECRETARY ADDRESS: 68 Elm Street CITY/ST/ZIP/CO: Hopkinton, MA 01748 | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: Debra K. Shoji-Sinku TITLE: ASST SECRETARY ADDRESS: 68 Elm Street CITY/ST/ZIP/CO: Hopkinton, MA 01748 | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. | | |
| /s/ NATHANAEL M. DAVIS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | NATHANAEL M. DAVIS, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE | 9/27/2012 DATE |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. | | |