

1.) CORPORATION NAME:

Eurofins Lancaster Laboratories, Inc.

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL CORPORATE RESEARCH LTD
250 BROWNS HILL CT
MIDLOTHIAN, VA**

SCC ID NO: **F1904921**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CHESTERFIELD COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 250 BROWNS HILL COURT

CITY/ST/ZIP: MIDLOTHIAN, VA 23114

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.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TIMOTHY S OOSTDYK		
TITLE:	PRESIDENT		
ADDRESS:	2425 NEW HOLLAND PIKE		
CITY/ST/ZIP/CO:	LANCASTER, PA 17601		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	J WILSON HERSHEY		
TITLE:	CHAIRMAN		
ADDRESS:	2425 NEW HOLLAND PIKE		
CITY/ST/ZIP/CO:	LANCASTOR, PA 17601		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	THOMAS E WOLGEMUTH		
TITLE:	TREA		
ADDRESS:	2425 NEW HOLLAND PIKE		
CITY/ST/ZIP/CO:	LANCASTER, PA 17601		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RALF FASSBENDER		
TITLE:	DIRECTOR		
ADDRESS:	2200 Rittenhouse St., Ste. 175		
CITY/ST/ZIP/CO:	Des Moines, IA 50321		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Tim S Oostdyk		
TITLE:	DIRECTOR		
ADDRESS:	2425 New Holland Pike		
CITY/ST/ZIP/CO:	Lancaster, PA 17605		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Dr. J Wilson Hershey		
TITLE:	CEO		
ADDRESS:	2425 New Holland Pike		
CITY/ST/ZIP/CO:	Lancaster, PA 17605		

NAME: Ralf Fassbender TITLE: TREASURER ADDRESS: 2200 Rittenhouse St., Ste. 175 CITY/ST/ZIP/CO: Des Moines, IA 50321	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Dirk Bontridder TITLE: DIRECTOR ADDRESS: 2200 Rittenhouse St., Ste. 175 CITY/ST/ZIP/CO: Des Moines, IA 50321	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Doug Travis TITLE: SECRETARY ADDRESS: 2200 Rittenhouse St., Ste. 175 CITY/ST/ZIP/CO: Des Moines, IA 50321	<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/ Doug Travis	Doug Travis, SECRETARY	8/8/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.