

Form PTO-1594 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office

Tab settings

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Home Diagnostics, Inc.

- Individual(s) Association General Partnership Limited Partnership Corporation-State Other

Additional name(s) of conveying party(ies) attached? Yes No

2. Name and address of receiving party(ies)

Name: Wachovia Bank, National Association

Internal Address:

Address:

Street Address: 225 Water Street - FL0070

City: Jacksonville State: Florida Zip: 32202

- Individual(s) citizenship Association National Association General Partnership Limited Partnership Corporation-State Other

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? Yes No

3. Nature of conveyance:

- Assignment Merger Security Agreement Change of Name Other

Execution Date: September 17, 2004

4. Application number(s) or registration number(s):

A. Trademark Application No.(s)

See Exhibit "A" attached hereto.

B. Trademark Registration No.(s)

See Exhibit "A" attached hereto.

Additional number(s) attached Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Brendan A. Barry, Esq.

Internal Address: Angelo, Barry & Banta, P.A.

Street Address: 515 East Las Olas Boulevard

Suite 850

City: Fort Lauderdale State: Florida Zip: 33301

6. Total number of applications and registrations involved:

2

7. Total fee (37 CFR 3.41): \$ 65.00

- Enclosed Authorized to be charged to deposit account

8. Deposit account number:

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Angelo, Barry & Banta, P.A.

Brendan A. Barry, Partner

Name of Person Signing

Signature

February 9, 2005

Date

Total number of pages including cover sheet, attachments, and document

3

Mail documents to be recorded with required cover sheet information to: Commissioner of Patent & Trademarks, Box Assignments Washington, D.C. 20231

OP \$65.00 78321821

**EXHIBIT "A"****TRADEMARKS**

	<b><u>Trademark Name</u></b>	<b><u>Serial Number</u></b>	<b><u>Registration Number</u></b>	<b><u>Registration Date/Status</u></b>
1.	KETOCARE	78/321,821	N/A	Request for Extension to File Opposition 9/3/04
2.	GENTLE DRAW	76/348,447	N/A	Final Review; Published for Opposition 9/1/04



SunTrust Center - Suite 850 - 515 East Las Olas Boulevard - Fort Lauderdale, FL - 33301  
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**FACSIMILE TRANSMISSION**

NAME	COMPANY	FAX NUMBER
Patent Trademark Office	Assignment Recording Department	(703) 306-5995

FROM: Philip M. Hanaka, Esquire  
*email: pmh@angelolaw.com*

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DATE/TIME: February 10, 2005 (10:21 AM)

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REFERENCE NO.: Wachovia Bank/Home Diagnostics (691810.141)

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NO. OF PAGES: **5** including this page

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Attached please find the completed PTO-1594 Form with all appropriate Exhibits attached. Please record and return to my attention.

Should you have any questions or comments regarding the attached, please do not hesitate to contact me.

Thank you.

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**TRADEMARK**  
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**EXHIBIT "A"**