

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006499

FILED
Jan 03, 2012
Secretary of State

Entity Name: FISHER & PAYKEL HEALTHCARE, INC.

Current Principal Place of Business:

15365 BARRANCA PARKWAY
IRVINE, CA 92618 US

New Principal Place of Business:

Current Mailing Address:

15365 BARRANCA PARKWAY
IRVINE, CA 92618 US

New Mailing Address:

FEI Number: 33-0675741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIQ CORPORATE SERVICES, INC.
1574 VILLAGE SQUARE BOULEVARD
SUITE 100
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DIR
Name: DANIELL, MICHAEL DIRECTO
Address: 15 MAURICE PAYKEL PLACE, EAST TAMAKI
City-St-Zip: AUCKLAND, NEW ZEALAND, NZ 2013 NZ

Title: DIR
Name: SHEARER, PAUL DIRECTO
Address: 15 MAURICE PAYKEL PLACE, EAST TAMAKI
City-St-Zip: AUCKLAND, NEW ZEALAND, NZ 2013 NZ

Title: PRES
Name: CALLAHAN, JUSTIN PRESIDE
Address: 15365 BARRANCA PARKWAY
City-St-Zip: IRVINE, CA 92618 US

Title: ST
Name: HERNANDEZ, PETER D SECRETA
Address: 15365 BARRANCA PARKWAY
City-St-Zip: IRVINE, CA 92618 US

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: PETER D. HERNANDEZ

TREA

01/03/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date