

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005305

Entity Name: AXCAN PHARMA US, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

22 INVERNESS CENTER PKWY
SUITE 310
BIRMINGHAM, AL 35242

New Principal Place of Business:

Current Mailing Address:

22 INVERNESS CENTER PKWY
SUITE 310
BIRMINGHAM, AL 35242

New Mailing Address:

FEI Number: 23-2639766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: GOSSELLA, LEON F
Address: 597 BOUL LAURIER
City-St-Zip: MONT-SAINT-HILAIRE, QB

Title: VCFO () Delete
Name: MIMS, DAVID W
Address: 1200 CORPORATE DR
City-St-Zip: BIRMINGHAM, AL 35242

Title: VCFO () Delete
Name: GANNON, STEVE
Address: 597, BOUL. LAURIER MONT-SAINTE- HILAIRE
City-St-Zip: QUEBEC, CA J3H 4X8

Title: VAS () Delete
Name: DONZE, MARTHA
Address: 22 INVERNESS CENTER PKWY., STE 210
City-St-Zip: BIRMINGHAM, AL 35242

Title: CONT () Delete
Name: BRAY, ANITA
Address: 22 INVERNESS CENTER PKWY STE 310
City-St-Zip: BIRMINGHAM, AL 35242

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: VERWIEL, FRANK A
Address: 597 BOUL LAURIER
City-St-Zip: MONT-SAINT-HILAIRE, QB J3H 4X8

Title: VCOO (X) Change () Addition
Name: MIMS, DAVID W
Address: 1200 CORPORATE DR
City-St-Zip: BIRMINGHAM, AL 35242

Title: VCSO (X) Change () Addition
Name: LEBEAUT, ALEX
Address: 721 ROUTE 202-206, 1ST FLOOR
City-St-Zip: BRIDGEWATER, NJ 08807

Title: CONT (X) Change () Addition
Name: FANT, MIKE
Address: 22 INVERNESS CENTER PKWY., STE 210
City-St-Zip: BIRMINGHAM, AL 35242

Title: DIRE (X) Change () Addition
Name: DONZE, MARTHA
Address: 22 INVERNESS CENTER PKWY STE 310
City-St-Zip: BIRMINGHAM, AL 35242

Title: DIRE () Change (X) Addition
Name: GANNON, STEVE
Address: 597, BOUL. LAURIER
City-St-Zip: MONT-SAINT-HILAIRE, QB J3H 4X8

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MIKE FANT

CONT

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date