

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**May 11, 1999 8:00 am**  
**Secretary of State**

05-11-1999 90033 012 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P09256**

1. Corporation Name

**MILLIPORE CORPORATION**

Principal Place of Business

**80 ASHBY ROAD  
BEDFORD MA 01730**

Mailing Address

**80 ASHBY ROAD  
BEDFORD MA 01730**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**02/26/1986**

4. FEI Number

**04-2170233**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip Country  
**24** **25**

**28** Zip Country  
**29** **30**

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**85** Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **CEO** ☐ DELETE  
NAME **C. WILLIAM ZADEL**  
STREET ADDRESS **76 HOWARD GLEASON ROAD**  
CITY-ST-ZIP **COHASSET MA**

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

*see attached schedule*

TITLE **C** ☐ DELETE  
NAME **BEARD, JOHN E**  
STREET ADDRESS **194 GLEZEN LANE**  
CITY-ST-ZIP **WAYLAND MA**

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **VPT** ☐ DELETE  
NAME **CARROLL, MICHAEL P.**  
STREET ADDRESS **31 MAYNARD FARM**  
CITY-ST-ZIP **SUDBURY MA**

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **AC** ☐ DELETE  
NAME **POWERS, PATRICIA (CLERK)**  
STREET ADDRESS **25 COLBY ROAD**  
CITY-ST-ZIP **WELLESLEY MA**

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Patricia Powers*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**PATRICIA POWERS 4-29-99 781/533-6000**  
Date Daytime Phone #

CR2E034 (1/1/98)

5 44944-90033-12  
PO9256

Millipore Corporation  
Bedford, MA 01730

Officers

<u>Name</u>	<u>Title</u>	<u>Residence Address</u>	<u>Social Security #</u>
C. William Zadel	Chairman, C.E.O. & President	297 Commonwealth Ave, Unit 3 Boston, MA 02115	356-34-4340
*John E. Beard	Clerk	194 Glezen Lane Wayland, MA 01779	
Patricia Powers	Asst. Clerk	25 Colby Road Wellesley, MA	171-36-2385
Douglas B. Jacoby	Vice President	57 Orne Street Marblehead, MA 01745	189-36-9805
Michael P. Carroll	Vice President	31 Maynard Farm Sudbury, MA 01776	036-32-6550
John Edward Lary	Corporate Vice President	19 Freedom Farm Road Acton, MA 01720	049-34-6391
Joanna Nikka	Vice President	30 Burlington Road Bedford, MA 01730	020-46-0366
Jeffrey Rudin	Vice President	20 Deerfield Road Sherborn, MA 01770	142-44-8436
Francis J. Lunger	C.F.O., Vice President & Treasurer	8 Basswood Lane Andover, MA 01810	193-36-5500

\*J.E. Beard is a partner  
of Ropes & Gray, One  
International Place,  
Boston, MA 02110

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544944-90033-12  
P18256

Directors of Millipore Corporation

<u>Name</u>	<u>Business Address</u>
Thomas O. Pyle	Boston Consulting Group 135 East 57 <sup>th</sup> Street New York, NY 10022
John F. Reno	Dynatech 3 New England Executive Park Burlington, MA 01803
C. William Zadel	Millipore Corporation 83 Ashby Road Bedford, MA 01730
Robert E. Caldwell	393 Mattison Drive Concord, MA 01742
Charles D. Baker	Northeastern University 225 Hayden Hall 360 Huntington Avenue Boston, MA 02115
Samuel C. Butler	Cravath, Swaine & Moore Worldwide Plaza 825 Eighth Avenue New York, NY 10019
Maureen A. Hendricks	Salomon Brothers, Inc. Seven World Trade Center 30 <sup>th</sup> Floor New York, NY 10048
Mark Hoffman	21 Campden Hill Square London W87JY England
Steven Muller, Ph.D.	The Paul H. Nitze School of Advanced International Studies 1619 Massachusetts Ave., N.W. Suite 711 Washington, DC 20036
Robert C. Bishop	AutoImmune, Inc. 128 Spring Street Lexington, MA 02173

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