

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09256

FILED  
Apr 22, 2011  
Secretary of State

**Entity Name:** MILLIPORE CORPORATION

**Current Principal Place of Business:**

290 CONCORD RD  
BILLERICA, MA 01821

**New Principal Place of Business:**

**Current Mailing Address:**

290 CONCORD RD  
BILLERICA, MA 01821

**New Mailing Address:**

**FEI Number:** 04-2170233

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: PS  
Name: HUTCHINSON, DAVID  
Address: 290 CONCORD ROAD  
City-St-Zip: BILLERICA, MA 01821

Title: D  
Name: RECKMAN, BERND  
Address: 290 CONCORD ROAD  
City-St-Zip: BILLERICA, MA 01821

Title: AT  
Name: O'CONNOR, PAUL  
Address: 290 CONCORD ROAD  
City-St-Zip: BILLERICA, MA 01821

Title: VT  
Name: MATTACCHIONE, ANTHONY  
Address: 290 CONCORD ROAD  
City-St-Zip: BILLERICA, MA 01821

Title: V  
Name: SPINAZZOLA, TONI  
Address: 290 CONCORD ROAD  
City-St-Zip: BILLERICA, MA 01821

Title: D  
Name: KLINGER, OLAF  
Address: 290 CONCORD ROAD  
City-St-Zip: BILLERICA, MA 01821

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: PAUL O'CONNOR

AT

04/22/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date