2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000096022

Address:

Entity Name: ORTHO-MCNEIL FINANCE CO.

7500 CENTURION PKWY, STE 100

City-St-Zip: JACKSONVILLE, FL 32256

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10301 DEERWOOD PK BLVD BLDG 3 STE C					
	VILLE, FL 322	256			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
7500 CEN STE 100	TURION PKW	Υ			
	VILLE, FL 322	256			
FEI Number:	: 22-3714278	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
1200 S. PII	ORATION SYS NE ISLAND RI ION, FL 33324	D.			
	named entity of Florida.	submits this statement for th	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	nic Signature of Registered /	Agent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TREMEL, STE	ION PKWY, STE. 100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	ATS () Delete TIF R	Title:	() Change () Addition	

Address:

City-St-Zip:

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: KRISTIE R. HARRIS ATS 04/20/2009