

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006037

FILED
Apr 28, 2011
Secretary of State

Entity Name: SMITHS MEDICAL ASD, INC.

Current Principal Place of Business:

1265 GREY FOX ROAD
ST PAUL, MN 55112

New Principal Place of Business:

Current Mailing Address:

1265 GREY FOX ROAD
ST PAUL, MN 55112

New Mailing Address:

FEI Number: 95-3974847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR STE A
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: P/D
Name: MORRIS-HOPKINS, STUART
Address: 1265 GREY FOX ROAD
City-St-Zip: ST PAUL, MN 55112

Title: SEC
Name: DAVIES, RUSS
Address: 1265 GREY FOX ROAD
City-St-Zip: ST PAUL, MN 55112

Title: T/D
Name: MELO, TIBERIO
Address: 1265 GREY FOX ROAD
City-St-Zip: ST. PAUL, MN 55112

Title: D
Name: SESHADRI, SRINI
Address: 1265 GREY FOX ROAD
City-St-Zip: ST. PAUL, MN 55112

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: MEGAN TUCKER

AGNT

04/28/2011

Electronic Signature of Signing Officer or Director

Date