

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S15157

**Entity Name:** ABBOTT INFORMATICS CORPORATION

**Current Principal Place of Business:**

4000 HOLLYWOOD BLVD  
SUITE 515 SOUTH  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

100 ABBOTT PARK ROAD  
D367 AP6D (SALES TAX)  
ABBOTT PARK, IL 60064 US

**FEI Number:** 65-0234123

**Certificate of Status Desired:** No

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

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

*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

**Officer/Director Detail :**

Title            PRES  
Name            SPENCER, MARK  
Address        4000 HOLLYWOOD BLVD, STE 515-S  
City-State-Zip: HOLLYWOOD FL 33021

Title            TREASURER  
Name            PETERSON, KAREN  
Address        100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title            ASST. TREASURER  
Name            OOSTERBAAN, BENJAMIN E  
Address        100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title            SECRETARY  
Name            BERRY, JOHN A  
Address        100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title            ASST. SECRETARY  
Name            KAESEBIER, TARA  
Address        100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

*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:** TARA KAESEBIER

**ASSIST SECRETARY**

**06/26/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date