

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006370

Entity Name: HOSPIRA, INC.**Current Principal Place of Business:**275 N. FIELD DRIVE
LAKE FOREST, IL 60045**Current Mailing Address:**275 N. FIELD DRIVE
LAKE FOREST, IL 60045 US**FEI Number:** 20-0504497**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**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	PRESIDENT
Name	YOUNG, JOHN
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	SECRETARY
Name	GRANT, SUSAN
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	TREASURER
Name	MASIA, NEAL
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	GIORDANO, , DOUGLAS E.
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	MADDEN, MARGARET M.
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	SUPRAN, BRYAN A.
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

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: SUSAN GRANT**SECRETARY****04/14/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date