2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2013
Secretary of State
CC3509463554

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
DEPT 9730, BLDG H1-4
LAKE FOREST, IL 60045

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	CEO
Name	BALL, F. MICHAEL
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	CFO
Name	WERNER, THOMAS E
Address	275 N. FILED DR
City-State-Zip:	LAKE FOREST IL 60045

Title	CHAIRMAN
Name	STALEY, JOHN C
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	BOWLES, BARBARA L
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	SEC
Name	BEDWARD, ROYCE R
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	TREA
Name	CHIALDIKAS, MIKE
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	BAILEY II, IRVING W
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	CURRAN, CONNIE R
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

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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: THOMAS E WERNER — SR VP FINANCE, CFO — 04/30/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

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

Title	DIRECTOR
Name	SOKOLOV, JACQUE J
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	WHEELER, MARK F
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	HALE, ROGER W
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	VON PRONDZYNSKI, HEINO
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045

Title	DIRECTOR
Name	BALL, F MICHAEL
Address	275 N. FIELD DRIVE
City-State-Zip:	LAKE FOREST IL 60045