

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000006602

**Entity Name:** MEDIVANCE, INC.**Current Principal Place of Business:**321 SOUTH TAYLOR AVENUE  
LOUISVILLE, CO 80027-3076**Current Mailing Address:**321 SOUTH TAYLOR AVENUE  
LOUISVILLE, CO 80027-3076 US**FEI Number: 84-1462606****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
155 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 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, DIRECTOR  
Name            CURRY, PETER R.  
Address        321 SOUTH TAYLOR AVENUE  
City-State-Zip: LOUISVILLE CO 80027-3076

Title            TREASURER  
Name            LOWRY, SCOTT T.  
Address        321 SOUTH TAYLOR AVENUE  
City-State-Zip: LOUISVILLE CO 80027-3076

Title            DIRECTOR  
Name            HOLLAND, CHRISTOPHER S.  
Address        321 SOUTH TAYLOR AVENUE  
City-State-Zip: LOUISVILLE CO 80027-3076

Title            VP, SECRETARY, DIRECTOR  
Name            KHICHI, SAMRAT S  
Address        321 SOUTH TAYLOR AVENUE  
City-State-Zip: LOUISVILLE CO 80027-3076

Title            DIRECTOR  
Name            WEILAND, JOHN H.  
Address        321 SOUTH TAYLOR AVENUE  
City-State-Zip: LOUISVILLE CO 80027-3076

*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: SAMRAT S KHICHI****SECRETARY****04/11/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date