

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002424

Entity Name: PATTERSON MEDICAL SUPPLY, INC.

Current Principal Place of Business:

28100 TORCH PARKWAY
ATTN: JOSEPH HORVATH SUITE 700
WARRENVILLE, IL 60555

Current Mailing Address:

1031 MENDOTA HEIGHTS RD.
ATTN: DENIS SCHIRMERS
ST. PAUL, MN 55120

FEI Number: 20-4590834

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	P
Name	ORSCHELN, MICHAEL
Address	28100 TORCH PKWY SUITE 700
City-State-Zip:	WARRENVILLE IL 60555
Title	VICE PRESIDENT FINANCE
Name	GODSIL, RAYMOND D. III
Address	28100 TORCH PARKWAY ATTN: JOSEPH HORVATH SUITE 700
City-State-Zip:	WARRENVILLE IL 60555
Title	ASSISTANT SECRETARY
Name	PARCHEM, JAMES ANDREW
Address	28100 TORCH PARKWAY ATTN: JOSEPH HORVATH SUITE 700
City-State-Zip:	WARRENVILLE IL 60555

Title	VP
Name	GRAVEL, MICHAEL R
Address	28100 TORCH PARKWAY ATTN: JOSEPH HORVATH SUITE 700
City-State-Zip:	WARRENVILLE IL 60555
Title	VICE PRESIDENT SALES & MARKETING
Name	SCHMIDT, DOUGLAS A.
Address	28100 TORCH PARKWAY ATTN: JOSEPH HORVATH SUITE 700
City-State-Zip:	WARRENVILLE IL 60555

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: JAMES ANDREW PARCHEM

ASSISTANT SECRETARY 01/19/2016

Electronic Signature of Signing Officer/Director Detail

Date