

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002424

Entity Name: PATTERSON MEDICAL SUPPLY, INC.

Current Principal Place of Business:

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

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 SPROAT, DAVID
Address 1031 MENDOTA HEIGHTS RD.
City-State-Zip: ST. PAUL MN 55120

Title VTD
Name ARMSTRONG, R STEPHEN
Address 1031 MENDOTA HEIGHTS RD.
City-State-Zip: ST. PAUL MN 55120

Title S
Name HEIM, DEBRA
Address 270 REMINGTON ROAD
City-State-Zip: BOLINGBROOK IL 60440

Title AS
Name LEVITT, MATTHEW L
Address 1031 MENDOTA HEIGHTS RD.
City-State-Zip: ST. PAUL MN 55120

Title D
Name ANDERSON, SCOTT
Address 1031 MENDOTA HEIGHTS RD.
ATTN: DENIS SCHIRMERS
City-State-Zip: ST. PAUL MN 55120

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: R STEPHEN ARMSTRONG

TREASURER

01/07/2013

Electronic Signature of Signing Officer/Director Detail

Date