### **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000000658

Entity Name: JOHNSON & JOHNSON HEALTH AND WELLNESS SOLUTIONS,

INC.

FILED
Apr 25, 2023
Secretary of State
8093337063CC

### **Current Principal Place of Business:**

ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933

## **Current Mailing Address:**

ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933 US

FEI Number: 38-3414346 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	DIRECTOR, PRESIDENT	Title	TREASURER
Name	GREER JR., , LEONARD	Name	LITTLE, , DARRYL C

Address ONE JOHNSON & AMP; JOHNSON Address ONE JOHNSON & AMP; JOHNSON

PLAZA PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933 City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY Title ASST. SECRETARY

Name ADHOLA, , PINTO Name CHONTOFALSKY, , CLAIRE E

Address ONE JOHNSON & JOHNSON Address ONE JOHNSON & JOHNSON

PLAZA PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933 City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY Title ASST. SECRETARY

Name DELSORDO, , STEPHEN Name FELDMAN, , JAKE D

Address ONE JOHNSON & JOHNSON Address ONE JOHNSON & JOHNSON

PLAZA PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933 City-State-Zip: NEW BRUNSWICK NJ 08933

 Title
 ASST. SECRETARY
 Title
 ASST. SECRETARY

 Name
 GREER, , BRANDON
 Name
 LAWRENCE, , ALYSON

Address ONE JOHNSON & JOHNSON Address ONE JOHNSON & JOHNSON

PLAZA PLAZA

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#### Continues on page 2

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: DARRYL C. LITTLE TREASURER 04/25/2023

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title ASST. SECRETARY
Name MCDONALD, , DAVID

Address ONE JOHNSON & AMP; JOHNSON PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY
Name MCILHINNEY, , JOHN M

Address ONE JOHNSON & AMP; JOHNSON PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY

Name LAROCHE, , RACHELLE L

Address ONE JOHNSON & AMP; JOHNSON PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY
Name BORUP, , SCOTT

Address ONE JOHNSON & AMP; JOHNSON PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY

Name PEREZ LOPEZ, , CAROLINA

Address ONE JOHNSON & AMP; JOHNSON PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY
Name MCFALLS,, LAURA H

Address ONE JOHNSON & AMP; JOHNSON

PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY
Name MCKEEHAN, , ROBERT

Address ONE JOHNSON & AMP; JOHNSON

PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY
Name DONNELLY, , LAURA

Address ONE JOHNSON & AMP; JOHNSON

**PLAZA** 

City-State-Zip: NEW BRUNSWICK NJ 08933

Title ASST. SECRETARY
Name PATER, , MATTHEW

Address ONE JOHNSON & AMP; JOHNSON

PLAZA

City-State-Zip: NEW BRUNSWICK NJ 08933