

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000000658

**FILED**  
**Apr 15, 2015**  
**Secretary of State**  
**CC2025143898**

**Entity Name:** JOHNSON & JOHNSON HEALTH AND WELLNESS SOLUTIONS, INC.

**Current Principal Place of Business:**

130 SOUTH FIRST STREET  
ANN ARBOR, MI 48104

**Current Mailing Address:**

130 SOUTH FIRST STREET  
ANN ARBOR, MI 48104

**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, SECRETARY  
Name           CHEN, CINDY  
Address        130 SOUTH FIRST STREET  
City-State-Zip: ANN ARBOR MI 48104

Title           TREASURER  
Name           SWASEY, JO ANN  
Address        130 SOUTH FIRST STREET  
City-State-Zip: ANN ARBOR MI 48104

Title           DIRECTOR, PRESIDENT  
Name           GREER, LEONARD JR.  
Address        130 SOUTH FIRST STREET  
City-State-Zip: ANN ARBOR MI 48104

Title           VP  
Name           DONOVAN, WILLIAM  
Address        130 SOUTH FIRST STREET  
City-State-Zip: ANN ARBOR MI 48104

*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: CINDY CHEN

SECRETARY

04/15/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date