

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000004416

Entity Name: ZOETIS OF DELAWARE INC.

Current Principal Place of Business:

100 CAMPUS DRIVE
FLORHAM PARK, NJ 07932

Current Mailing Address:

100 CAMPUS DRIVE
FLORHAM PARK, NJ 07932 US

FEI Number: 46-0696167

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 CEO, DIRECTOR
Name ALAIX, JUAN RAMON
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title CORPORATE SECRETARY, EVP
Name CHEN, HEIDI
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title TREASURER
Name UDEN, CAMILLA
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title ASSISTANT TREASURER
Name MYCHALOWYCH, JEROME
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title ASSISTANT TREASURER
Name MYCHALOWYCH, JEROME
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title DIRECTOR
Name GERMANO, GENO J.
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title DIRECTOR
Name GIORDANO, DOUGLAS E.
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title DIRECTOR
Name HILL, CHARLES H.
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

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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: JEROME MYCHALOWYCH

ASSISTANT TREASURER 04/16/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCCALLISTER, MICHAEL B.
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title DIRECTOR
Name REED, WILLIAM M.
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title DIRECTOR
Name STEERE, WILLIAM C JR.
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title DIRECTOR
Name NORDEN, GREGORY
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932

Title DIRECTOR
Name SCHULMAN, AMY W.
Address 100 CAMPUS DRIVE
City-State-Zip: FLORHAM PARK NJ 07932