

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 811855

FILED
Apr 03, 2009
Secretary of State

Entity Name: SMITHKLINE BEECHAM CORPORATION

Current Principal Place of Business:

ONE FRANKLIN PLAZA, FP2335
PHILADELPHIA, PA 191021223

New Principal Place of Business:

Current Mailing Address:

ONE FRANKLIN PLAZA, FP2335
PHILADELPHIA, PA 191021223

New Mailing Address:

FEI Number: 23-1099050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: CORRIGAN, MICHAEL
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

Title: P () Delete
Name: VIEHBACHER, CHRISTOPHER
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

Title: T () Delete
Name: KLIJIAN, AUDREY
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

Title: AT () Delete
Name: LYONS, JAN
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

Title: S () Delete
Name: ASHE, CAROL G
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WERNER, STEVEN
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MOSHER, WILLIAM G
Address: ONE FRANKLIN PLAZA
City-St-Zip: PHILADELPHIA, PA 19101

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAN C. LYONS

AT

04/03/2009

Electronic Signature of Signing Officer or Director

Date