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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 813186

1. Corporation Name
PHARMACIA & UPJOHN COMPANY

Principal Place of Business 7000 PORTAGE RD UNIT 8111-242-52 KALAMAZOO MI 49001-0102 US	Mailing Address 7000 PORTAGE RD 8110 -243-90 KALAMAZOO MI 49001-0102 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/13/1958

4. FEI Number

38-1123360

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

Yes

No

2. Principal Place of Business

21 Same

2a. Mailing Address

26

Suite, Apt. #, etc.

22 Unit 8111-243-90

Suite, Apt. #, etc.

27

City & State

23

City & State

28

Zip

Country

24

25

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	PARFET, DONALD R	
STREET ADDRESS	4841 RIDGEWOOD DR	
CITY-ST-ZIP	RICHLAND MI 49083	

TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	MEISENHOLDER, ROBERT J	
STREET ADDRESS	5220 SWALLOW	
CITY-ST-ZIP	PORTAGE MI 49002	

TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	KRAMER, R.G.	
STREET ADDRESS	6872 OLEANDERLANE	
CITY-ST-ZIP	PORTAGE MI	

TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	JACKSON, JACK J	
STREET ADDRESS	8711 SWAN	
CITY-ST-ZIP	KALAMAZOO MI 49002	

TITLE		<input checked="" type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	HASSAN, FRED	
1.3 STREET ADDRESS	95 CORPORATE DR. P.O. Box 6995	
1.4 CITY-ST-ZIP	BRIDGEWATER N.J. 08807-1265	

2.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SCHMITZ, DON W.	
2.3 STREET ADDRESS	95 CORPORATE DR. P.O. Box 6995	
2.4 CITY-ST-ZIP	BRIDGEWATER N.J. 08807-1265	

3.1 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	VON HORNE, ALEXANDRA	
3.3 STREET ADDRESS	95 CORPORATE DR. P.O. Box 6995	
3.4 CITY-ST-ZIP	BRIDGEWATER N.J. 08807-1265	

4.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	PARFET, DONALD R.	
4.3 STREET ADDRESS	11000 RIDGEWOOD DR.	
4.4 CITY-ST-ZIP	RICHLAND MI. 49083	

5.1 TITLE	ASSIST. TREAS.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	WARD, ROBERT D.	
5.3 STREET ADDRESS	10411 LLOY	
5.4 CITY-ST-ZIP	KALAMAZOO MI 49001	

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/1/99

CR2E034 (11/98)

0549961

PHARMACIA & UPJOHN COMPANY
Directors and Officers List

300004-90043-48
813186

Directors:

Fred Hassan
Christopher J. Coughlin
Richard T. Collier

Officers:

Fred Hassan	• President and Chief Executive Officer
Göran A. Ando	• Executive Vice President
Christopher J. Coughlin	• Executive Vice President and Chief Financial Officer
Timothy G. Rothwell	• Executive Vice President
Håkan Åström	• Senior Vice President
Richard T. Collier	• Senior Vice President and Assistant Secretary
Carrie Smith Cox	• Senior Vice President
Jack J. Jackson	• Senior Vice President
Paul L. Matson	• Senior Vice President
Donald R. Parfet	• Senior Vice President 11000 RIDGEWOOD DR. RICHLAND, MI 49083
Mats Pettersson	• Senior Vice President
Robert G. Thompson	• Senior Vice President and Controller
Don W. Schmitz	• Vice President and Secretary
Larry Moore	• Assistant Secretary
Robert J. Meisenhelder	• Assistant Secretary 5220 SWALLOW PORTAGE, MI 49002
Fredrik Berg	• Assistant Secretary
Harold A. Elkan	• Assistant Secretary 7000 PORTAGE RD. KALAMAZOO, MI 49001
Alexandra van Horne	• Treasurer
George R. McPherson	• Assistant Treasurer
Robert D. Ward	• Assistant Treasurer 10411 LLOY KALAMAZOO, MI 49004

Effective: 17 August 1998

• BUSINESS ADDRESS -
PO Box 6995
95 CORPORATE DRIVE
BRIDGEWATER, NEW JERSEY 08807-1265