

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State
 05-16-2002 90040 038 ***150.00

DOCUMENT # 813186

1. Entity Name

PHARMACIA & UPJOHN COMPANY

Principal Place of Business

**7000 PORTAGE RD
 UNIT 8111-88-106
 KALAMAZOO MI 49001-0102
 US**

Mailing Address

**7000 PORTAGE RD
 UNIT 8111-88-106
 KALAMAZOO MI 49001-0102
 US**

2. Principal Place of Business

TAX DEPT. 888-106

Suite, Apt. #, etc.

7000 PORTAGE RD.

City & State

KALAMAZOO MI

Zip

same

Country

3. Mailing Address

TAX DEPT. 888-106

Suite, Apt. #, etc.

7000 PORTAGE RD.

City & State

KALAMAZOO MI

Zip

same

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

38-1123360

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HASSAN, FRED 9 NOTTINGHAM DRIVE FLORHAM PARK NJ 07932	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCHMITZ, DON W 48 MONTFORT DRIVE BELLE MEAD NJ 08502	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VAN HORNE, ALEXANDRA 350 W 57TH STREET, APT 18-C NEW YORK NY 10019	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WHITLOCK, J WM. 9706 OAKVIEW PORTAGE MI 49002	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT WARD, ROBERT D 25116 67TH AVENUE LAWTON MI 49065	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HASSAN, FRED 100 RTE 206 N PEAPACK NJ 07977	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	HASSAN FRED 100 ROUTE 206 NORTH PEAPACK NJ 07977	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCHMITZ DON W 100 ROUTE 206 NORTH PEAPACK NJ 07977	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100 ROUTE 206 NORTH PEAPACK NJ 07977	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	7000 PORTAGE RD. KALAMAZOO MI 49001	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	REENTS, SCOTT T. 7000 PORTAGE RD. KALAMAZOO MI 49001	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100 ROUTE 206 NORTH PEAPACK NJ 07977	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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

ROBERT D. BEGLIN-ASSIST TREAS

4/25/02

Date

Daytime Phone #

CR2E034 (9/01)

Attachment Doc# 813186

PHARMACIA & UPJOHN COMPANY
Officers & Directors

NAME	TITLE	ADDRESS
* Fred Hassan	President & Director	100 Rte 206 N Peapack, NJ 07977
Goran A. Ando	Exec. Vice President	100 Rte 206 N Peapack, NJ 07977
* Christopher J. Coughlin	Exec. Vice Pres. and CFO	100 Rte 206 N Peapack, NJ 07977
Timothy G. Rothwell	Exec. Vice President	100 Rte 206 N Peapack, NJ 07977
Hakan Astrom	Sr. Vice President	100 Rte 206 N Peapack, NJ 07977
* Richard T. Collier	Sr. Vice Pres. and Assistant Secretary	100 Rte 206 N Peapack, NJ 07977
Carrie Smith Cox	Sr. Vice President	100 Rte 206 N Peapack, NJ 07977
Paul L. Matson	Sr. Vice President	100 Rte 206 N Peapack, NJ 07977
Robert G. Thompson	Sr. Vice President and Controller	100 Rte 206 N Peapack, NJ 07977
Michael Dubois	Sr. Vice President	100 Rte 206 N Peapack, NJ 07977
Birgitta Klasen	Sr. Vice President	100 Rte 206 N Peapack, NJ 07977
Ian McInnes	Sr. Vice President	100 Rte 206 N Peapack, NJ 07977
Don W. Schmitz	Vice President and Secretary	100 Rte 206 N Peapack, NJ 07977
Carl W. Battle	Vice President and Assistant Secretary	100 Rte 206 N Peapack, NJ 07977
Larry Moore	Assistant Secretary	100 Rte 206 N Peapack, NJ 07977
Roy Birnbaum	Assistant Secretary	Allied Kajima Bldg. Room 1101-3 138 Gloucester Road Wanchai, Hong Kong
J. William Whitlock	Assistant Secretary	7000 Portage Rd Kalamazoo, MI 49001
Fredrik Berg	Assistant Secretary	100 Rte 206 N Peapack, NJ 07977
Harold A. Elkan	Assistant Secretary	7000 Portage Rd Kalamazoo, MI 49001
Alexandra vanHorne	Treasurer	100 Rte 206 N Peapack, NJ 07977
Scott T. Reents	Assistant Treasurer	7000 Portage Rd Kalamazoo, MI 49001
Carl H. Degen	Assistant Treasurer	7000 Portage Rd Kalamazoo, MI 49001
Roger L. Beglin	Assistant Treasurer	100 Rte 206 N Peapack, NJ 07977

* Director

01-Jan-02