

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 834304

FILED
Feb 08, 2010
Secretary of State

Entity Name: NESTLE HEALTHCARE NUTRITION, INC.

Current Principal Place of Business:

10801 RED CIRCLE DRIVE
MINNETONKA, MN 55343

New Principal Place of Business:

Current Mailing Address:

10801 RED CIRCLE DRIVE
MINNETONKA, MN 55343

New Mailing Address:

FEI Number: 41-0991082

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 32301 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: PRES
Name: YATES, DAVID
Address: 12 VREELAND ROAD
City-St-Zip: FLORHAM PARK, NJ 17932 US

Title: VP
Name: HARBECK, DAVID
Address: 12500 WHITEWATER DRIVE
City-St-Zip: MINNETONKA, MN 55343 US

Title: TREA
Name: DAVIS, MICHAEL
Address: 383 MAIN AVE, 5TH FLOOR
City-St-Zip: NORWALK, CT 06851 US

Title: DIR
Name: GARDET, MICHEL
Address: GRAND ATRIUM, 30, ROUTE DES AVOUILLONS
City-St-Zip: CH 1196 GLAND, SZ

Title: DIR
Name: KEARINS, NOEL
Address: GRAND ATRIUM, 30, ROUTE DES AVOUILLONS
City-St-Zip: CH 1196 GLAND, SZ

Title: DIR
Name: SCHMIDT, KURT
Address: 12 VREELAND ROAD, 2ND FLOOR, BOX 697
City-St-Zip: FLORHAM PARK, NJ 17932 US

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: MICHAEL DAVIS

TREA

02/08/2010

Electronic Signature of Signing Officer or Director

Date