

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 834304

FILED  
Jan 26, 2012  
Secretary of State

**Entity Name:** NESTLE HEALTHCARE NUTRITION, INC.

**Current Principal Place of Business:**

12 VREELAND ROAD  
FLORHAM PARK, NJ 07932 US

**New Principal Place of Business:**

**Current Mailing Address:**

12500 WHITEWATER DRIVE  
MINNETONKA, MN 55343 US

**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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** YATES, DAVID  
**Address:** 12 VREELAND ROAD  
**City-St-Zip:** FLORHAM PARK, NJ 07932 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:** SEC  
**Name:** PEPIN, JAMES  
**Address:** 12 VREELAND ROAD  
**City-St-Zip:** FLORHAM PARK, NJ 07932 US

**Title:** DIR  
**Name:** STRAND, PAUL  
**Address:** 12 VREELAND ROAD  
**City-St-Zip:** FLORHAM PARK, NJ 07932 US

**Title:** DIR  
**Name:** OCHOA, JUAN  
**Address:** 12 VREELAND ROAD  
**City-St-Zip:** FLORHAM PARK, NJ 07932 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

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

TREA

01/26/2012

\_\_\_\_\_ Date