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PROFIT CORPORATION ANNUAL REPORT

1999

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90128 006 ***150.00

	OOD MEDICAL COMPANY					
Principal Place	e of Business	Mailing Address			BIBIL BURG BIBG BIBI	1 4:51) (94)
1831 OLIVE ST. 1831 OLIVE ST. ST. LOUIS MO 63103 ST. LOUIS MO 63103				DO NOT WRITE IN TH	IS SPACE	
				3. Date Incorporated or Qualifed	_	
				02 130 18	2	
2. Principal Pl	lace of Business	2a. Mailing Address	012	4. FEI Number	<u> </u>	ied For
21 1915		26 One Town	Center Koag	13-3106295		Applicable_
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Ade Fee Requ	
City & State	e	City & State	/ 4-1	6. Election Campaign Financing	\$5.00 м	ay Be
- ~/ /	ouis MO	28 Boca Rate	on, FL	Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	ntangible	#13.
24 63	103 [25]		30	Personal Property Tax.		7No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registere	a Agent	
CT C	CORPORATION SYSTEM		_	The state of the s	· · · · · · · · · · · · · · · · · · ·	
	SOUTH PINE ISLAND RD.		82 Street Add	ress (P.O. Box Number is Not Accentable)	,	
	ITATION FL 33244		83		. ,	<u> </u>
			•5			
			84 City	F	85 7'n Ca	rde ,
SIGNATURE	m familiar with, and accept the obligation of th		Registered Agent signature require	ad when reinstating) DATE		
12.	OFFICERS A					
TITLE			13.	ADDITIONS/CHANGES TO OFFICERS		
2424	V CONSIDING TOTAL D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR: ☐ Change	S IN 12
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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 the attachment with an address, with all other like empowered.

SIGNATURE:

Sherwood Medical Company 1915 Olive Street St. Louis, MO 63103 FEIN: 13-3106295

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ANNUAL REPORT INFORMATION OFFICERS & DIRECTORS

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John J. Guarnieri One Tyco Park Exeter, NH 03833

OFFICERS:

PRESIDENT

Richard J. Meelia

VICE PRESIDENT

Charles J. Dockendorff 15 Hampshire Street Mansfield, MA 02048

Kevin J. Gould 15 Hampshire Street Mansfield, MA 02048

Irving Gutin

TREASURER

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David Siskind 15 Hampshire Street Mansfield, MA 02048

ASSISTANT SECRETARY

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John H. Masterson 15 Hampshire Street Mansfield, MA 02048

M. Brian Moroze One Tyco Park Exeter, NH 03833

Vanessa Perillo One Town Center Road Boca Raton, FL 33486