


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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

04-29-1999 90128 006 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>				FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # 853936</b>					
1. Corporation Name <b>SHERWOOD MEDICAL COMPANY</b>					
Principal Place of Business <b>1831 OLIVE ST. ST. LOUIS MO 63103</b>			Mailing Address <b>1831 OLIVE ST. ST. LOUIS MO 63103</b>		
2. Principal Place of Business <b>21 1915 Olive Street</b>		2a. Mailing Address <b>26 One Town Center Road</b>		3. Date Incorporated or Qualified <b>08/30/82</b>	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number <b>13-3106295</b>	
23 City & State <b>St. Louis, MO</b>		28 City & State <b>Boca Raton, FL</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24 Zip <b>63103</b>		29 Zip <b>33486</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
25 Country		30 Country		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33244</b>			10. Name and Address of New Registered Agent		
81 Name			82 Street Address (P.O. Box Number is Not Applicable)		
83			84 City		
			85 Zip Code		
			<b>FL</b>		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
3.2 NAME					
4.1 CITY-ST-ZIP					
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUISITELY SIGNED

Date

Daytime Phone #

CR2E034 (1/1/98)

Sherwood Medical Company  
1915 Olive Street  
St. Louis, MO 63103

FEIN: 13-3106295

Page 1 of 1

853936

444743-901284

**ANNUAL REPORT INFORMATION**  
**OFFICERS & DIRECTORS**

**DIRECTORS:**

Irving Gutin  
One Tyco Park  
Exeter, NH 03833

Richard J. Meelia  
15 Hampshire Street  
Mansfield, MA 02048

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**

Michael A. Robinson  
One Town Center Road  
Boca Raton, FL 33486

**SECRETARY**

David Siskind  
15 Hampshire Street  
Mansfield, MA 02048

**ASSISTANT SECRETARY**

Stanley N. Garber  
1915 Olive Street  
St. Louis, MO 63103

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