# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 10, 2012**
**Secretary of State**

DOCUMENT# F01000003096

**Entity Name:** ZOLL MEDICAL CORPORATION

**Current Principal Place of Business:**

11802 RIDGE PARK WAY
STE 400
BROOKFIELD, CO 80021

**New Principal Place of Business:**

269 MILL ROAD
CHELMSFORD, MA 01824

**Current Mailing Address:**

269 MILL RD
CHELMFORD, MA 01824

**New Mailing Address:**

**FEI Number: 04-2711626** **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 323012525 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: CD
Name: PACKER, RICHARD A
Address: 269 MILL ROAD
City-St-Zip: CHELMSFORD, MA 01824

Title: VCFO
Name: WHITON, A. ERNEST
Address: 269 MILL ROAD
City-St-Zip: CHELMSFORD, MA 01824

Title: VT
Name: BERGERON, JOHN P
Address: 269 MILL ROAD
City-St-Zip: CHELMSFORD, MA 01824

Title: V
Name: HAMILTON, WARD M
Address: 269 MILL ROAD
City-St-Zip: CHELMSFORD, MA 01824

Title: S
Name: GROSSMAN, AARON
Address: 269 MILL ROAD
City-St-Zip: CHELMSFORD, MA 01824

Title: D
Name: CLAFLIN, THOMAS M
Address: 269 MILL ROAD
City-St-Zip: CHELMSFORD, MA 01824

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: JOHN P BERGERON VT 04/10/2012

Electronic Signature of Signing Officer or Director — Date