
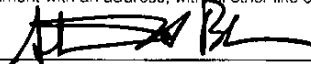


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2005 8:00 am
Secretary of State

05-09-2005 90292 012 ***150.00

DOCUMENT # F03000005558					
1. Entity Name PURDUE PHARMA INC.					
Principal Place of Business ONE STAMFORD FORUM STAMFORD, CT 06901		Mailing Address ONE STAMFORD FORUM STAMFORD, CT 06901			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 06-1307486	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		
			Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO FRIEDMAN, MICHAEL ONE STAMFORD FORUM STAMFORD, CT 06901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS UDELL, HOWARD R ONE STAMFORD FORUM STAMFORD, CT 06901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President & Assistant Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Howard R. Udell One Stamford Forum Stamford, CT 06901	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPS BAKER, STUART D ONE STAMFORD FORUM STAMFORD, CT 06901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPT MAHONY, EDWARD B ONE STAMFORD FORUM STAMFORD, CT 06901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SACKLER, MORTIMER D M.D. ONE STAMFORD FORUM STAMFORD, CT 06901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SACKLER, THERESA E. ONE STAMFORD FORUM STAMFORD, CT 06901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Stuart D. Baker, Executive Vice President & Secretary		Date: 4-15-05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone # 203-588-7010	

50050839



04072005 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required


Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

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SIGNATURE:  Stuart D. Baker, Executive Vice President & Secretary Date: 4-15-05 Daytime Phone # 203-588-7010

Attachment

PURDUE PHARMA INC.
2005 FOR PROFIT CORPORATION ANNUAL REPORT

FO3000005558

10. Officers/Directors

Name	Title	Address
Michael Friedman	President and Chief Executive Officer	One Stamford Forum Stamford, Connecticut 06901
Howard R. Udell	Executive Vice President, Chief Legal Officer and Assistant Secretary	One Stamford Forum Stamford, Connecticut 06901
Stuart D. Baker	Executive Vice President, Counsel to the Board and Secretary	One Stamford Forum Stamford, Connecticut 06901
Edward B. Mahony -	Executive Vice President, Chief Financial Officer and Treasurer	One Stamford Forum Stamford, Connecticut 06901
Mortimer D. Sackler, M.D.	Director	One Stamford Forum Stamford, Connecticut 06901
Theresa E. Sackler	Director	One Stamford Forum Stamford, Connecticut 06901
Robert B. Shapiro	Director	One Stamford Forum Stamford, Connecticut 06901
Kathe A. Sackler, M.D.	Director	One Stamford Forum Stamford, Connecticut 06901
Mortimer D.A. Sackler	Director	One Stamford Forum Stamford, Connecticut 06901
Raymond R. Sackler, M.D.	Director	One Stamford Forum Stamford, Connecticut 06901
Beverly Sackler	Director	One Stamford Forum Stamford, Connecticut 06901
Richard S. Sackler, M.D.	Director	One Stamford Forum Stamford, Connecticut 06901
Jonathan D. Sackler	Director	One Stamford Forum Stamford, Connecticut 06901