

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006370

Entity Name: HOSPIRA, INC.

FILED
Apr 25, 2012
Secretary of State

Current Principal Place of Business:

275 N. FIELD DRIVE
LAKE FOREST, IL 60045

New Principal Place of Business:

Current Mailing Address:

DEPT 9730, H1-4
275 N. FIELD DRIVE
LAKE FOREST, IL 60045

New Mailing Address:

275 N. FIELD DRIVE
DEPT 9730, BLDG H1-4
LAKE FOREST, IL 60045

FEI Number: 20-0504497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO
Name: BALL, F. MICHAEL
Address: 275 N. FIELD DRIVE
City-St-Zip: LAKE FOREST, IL 60045

Title: SEC
Name: SMITH, BRIAN J
Address: 275 N. FIELD DRIVE
City-St-Zip: LAKE FOREST, IL 60045

Title: CFO
Name: WERNER, THOMAS E
Address: 275 N. FILED DR
City-St-Zip: LAKE FOREST, IL 60045

Title: TREA
Name: CHIALDIKAS, MIKE
Address: 275 N. FIELD DRIVE
City-St-Zip: LAKE FOREST, IL 60045

Title: SRVP
Name: HARDY, JAMES H JR
Address: 275 N. FIELD DRIVE
City-St-Zip: LAKE FOREST, IL 60045

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: THOMAS E WERNER

CFO

04/25/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date