## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000002654

Entity Name: ABBOTT DIABETES CARE SALES CORPORATION

FILED Jan 04, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1360 SOUTH LOOP ROAD ALAMEDA, CA 945026500 US

**Current Mailing Address: New Mailing Address:** 

100 ABBOTT PARK ROAD 100 ABBOTT PARK ROAD D367 AP6D D367 AP6D (MJ) ABBOT PARK, IL 600646057 US ABBOT PARK, IL 600646057 US

FEI Number: 22-3890190 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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:

FREYMON, THOMAS C Name: 100 ABBOTT PARK RD Address: City-St-Zip: ABBOTT PARK RD, IL 60064

Title:

Name: MASON, HEATHER L 100 ABBOTT PARK ROAD Address: ABBOTT PARK, IL 60064 City-St-Zip:

VΡ Title:

SHOULTZ, AJ Name: 100 ABBOTT PARK RD Address: City-St-Zip: ABBOTT PARK, IL 60064

Title:

MUNZ, CHADWICK Name: Address: 100 ABBOTT PARK RD City-St-Zip: ABBOTT PARK, IL 60064

Title:

OOSTERBAAN, BENJAMIN E Name: Address: 100 ABBOTT PARK ROAD City-St-Zip: ABBOTT PARK, IL 60064

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: CHADWICK MUNZ S 01/04/2011