

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000004866

Entity Name: OTISMED CORPORATION

FILED  
Mar 29, 2011  
Secretary of State

**Current Principal Place of Business:**

1600 HARBOR BAY PKWAY  
SUITE 200  
ALAMEDA, CA 94502

**New Principal Place of Business:**

1600 HARBOR BAY PKWAY  
SUITE 200  
ALAMEDA, CA 94502 US

**Current Mailing Address:**

2825 AIRVIEW BLVD  
KALAMAZOO, MI 49002

**New Mailing Address:**

2825 AIRVIEW BLVD  
KALAMAZOO, MI 49002 US

FEI Number: 71-0988039

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: D  
Name: MCKINNEY, TONY M  
Address: 2825 AIRVIEW BLVD  
City-St-Zip: KALAMAZOO, MI 49002 US

Title: VP  
Name: LUM, ERIC  
Address: 2825 AIRVIEW BLVD  
City-St-Zip: KALAMAZOO, MI 49002 US

Title: S  
Name: HALL, CURTIS  
Address: 2825 AIRVIEW BLVD  
City-St-Zip: KALAMAZOO, MI 49002 US

Title: T  
Name: BLONDIA, JEANN M  
Address: 2825 AIRVIEW BLVD  
City-St-Zip: KALAMAZOO, MI 49002 US

Title: PD  
Name: MOGUL, MICHAEL P  
Address: 325 CORPORATE DRIVE  
City-St-Zip: MAHWAH, NJ 07430 US

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: ERIC LUM

VP

03/29/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date