

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 30, 2012
Secretary of State

Entity Name: COLGATE ORAL PHARMACEUTICALS, INC.

Current Principal Place of Business:

300 PARK AVE.
NEW YORK, NY 10022

New Principal Place of Business:

300 PARK AVENUE
NEW YORK, NY 10022 US

Current Mailing Address:

300 PARK AVE.
PK14
NEW YORK, NY 10022

New Mailing Address:

300 PARK AVENUE
NEW YORK, NY 10022 US

FEI Number: 22-3224729

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: PRES
Name: HOPKINS, SHEILA
Address: 300 PARK AVENUE
City-St-Zip: NEW YORK, NY 10022 US

Title: VD
Name: WALLACE, NOEL
Address: 300 PARK AVENUE
City-St-Zip: NEW YORK, NY 10022 US

Title: VSD
Name: WILKINS, CLIFFORD
Address: 300 PARK AVENUE
City-St-Zip: NEW YORK, NY 10022 US

Title: VTD
Name: CONBOY, STEPHEN
Address: 300 PARK AVENUE
City-St-Zip: NEW YORK, NY 10022 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: DARETH JEFFERS

POA

03/30/2012

Electronic Signature of Signing Officer or Director

Date