FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 2:15

DOCUMENT # F94000002361 (3)

1. SMITH & NEPHEW ROLYAN, INC.

ONE QUALITY DR
GERMANTOWN WI 53022

ONE QUALITY DR.
GERMANTOWN WI 53022

3. Date Incorporated or Qualified: 05/06/1994

3a. Date of Last Report:

4. FEI Number: 39-1083604

Applied For

Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution: $5.00 May Be Added to Fees

8. Does corporation owe funds, be subject to the payment of Florida Corporate Income Tax? Yes No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is not acceptable)

83

84 City FL 85 Zip Code

11. [illegible] Florida Statutes, [illegible] current corporate records. The undersigned, for the purpose of changing its registered office or registered agent, or both, in accordance with the provisions of Chapter 607, Florida Statutes, hereby adopts the statement in regard to registered agent [illegible] Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	CLARK, JOHN
STREET ADDRESS	ONE QUALITY DR.
CITY, ST, ZIP	GERMANTOWN WI 53022
TITLE	V
NAME	SOHNS, CHRISTINE
STREET ADDRESS	ONE QUALITY DR.
CITY, ST, ZIP	GERMANTOWN WI 53022
TITLE	V
NAME	HARKANSEE, PATRICIA
STREET ADDRESS	ONE QUALITY DR.
CITY, ST, ZIP	GERMANTOWN WI 53022
TITLE	V
NAME	UNGEMACH, ROBERT
STREET ADDRESS	ONE QUALITY DR.
CITY, ST, ZIP	GERMANTOWN WI 53022
TITLE	VT
NAME	SOUTHWORTH, P. DAVID
STREET ADDRESS	11775 STARKEY ROAD
CITY, ST, ZIP	LARGO FL 34649-1970
TITLE	S
NAME	PARRISH, BEN
STREET ADDRESS	1450 BROOKS ROAD
CITY, ST, ZIP	MEMPHIS TN 38116

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS

Change Add/Del

REMITTED BY MAY 1

14. I hereby certify that the individual signed to the [illegible] Florida Statutes, [illegible] certificate of status or good standing issued by the proper authority of the state of incorporation, and that my signature shall have the same legal effect as if made under oath. I further certify that I am an officer or director of the corporation or a receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears above, or on an attached amendment, or on previously filed documents with the corporation.

SIGNATURE: Ben Parrish 901/396-2121

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0480106 FP