2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002635

Entity Name: NOVO NORDISK INC.

FILED Feb 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: NOVO NORDISK INC. 100 COLLEGE ROAD WEST PRINCETON, NJ 085407810 **Current Mailing Address: New Mailing Address:** NOVO NORDISK LEGAL DEPARTMENT 100 COLLEGE ROAD WEST PRINCETON, NJ 085407810 FEI Number: 06-1061602 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition GRUHN, JERZY GRUHN, JERZY Name: Name: 100 COURAGE RD W 100 COLLEGE ROAD WEST Address: Address: City-St-Zip: PRINCETON, NJ 08540 City-St-Zip: W PRINCETON, NJ 08540 Title: Title: SD () Delete (X) Change () Addition Name: SHEHAN, JAMES C Name: SHEHAN, JAMES C 100 COLLEGE ROAD WEST 100 COLLEGE ROAD WEST Address: Address: PRINCETON, NJ 08540 PRINCETON, NJ 08540 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition FORNECKER, PHIL Name: Name: 100 COLLEGE RD WEST Address: Address: City-St-Zip: PRINCETON, NJ 08540 City-St-Zip: Title: () Delete Title: () Change () Addition RAMSBY, OLE F Name: Name: Address: NOVO ALLE, DK-2880, BAGSVAERD Address: City-St-Zip: BAGSVEARD, DENMARK, NA City-St-Zip: Title: Title: () Delete () Change () Addition Name: SCHULTZ, KAARE Name: NOVO ALLE, DK-2880, BAGSVAERD Address: Address: City-St-Zip: BAGSVEARD, DENMARK, NA City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES C SHEHAN S 02/10/2009