## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000003385

Entity Name: GE HEALTHCARE INC.

FILED Feb 20, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 101 CARNEGIE CENTER PRINCETON, NJ 08540 **Current Mailing Address: New Mailing Address:** 101 CARNEGIE CENTER PRINCETON, NJ 08540 FEI Number: 13-3786405 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 PETERS, DANIEL L CHIMINSKI, JOHN R Name: Name: 101 CARNEGIE CENTER 101 CARNEGIE CENTER Address: Address: City-St-Zip: PRINCETON NJ City-St-Zip: PRINCETON, NJ 08540 US VTD Title: VTD Title: () Delete (X) Change ( ) Addition PULITO, VITO PULITO, VITO Name: Name: 101 CARNEGIE CENTER 101 CARNEGIE CENTER Address: Address: PRINCETON, NJ 08540 PRINCETON, NJ 08540 US City-St-Zip: City-St-Zip: ( ) Delete Title: Title: VD. VD. (X) Change ( ) Addition GIORDANO, THOMAS QUINN, DONALD J Name: Name: 101 CARNEGIE CENTER 101 CARNEGIE CENTER Address: Address: City-St-Zip: PRINCETON, NJ City-St-Zip: PRINCETON, NJ 08540 US Title: ٧S () Delete Title: () Change () Addition FREEDMAN, JEFFREY Name: Name: Address: 101 CARNEGIE CENTER Address: City-St-Zip: PRINCETON, NJ City-St-Zip: Title: AS Title: () Delete AS (X) Change ( ) Addition PERRO, CONCETTA M Name: PERRO, CONCETTA M Name: 310 WARREN STREET Address: 101 CARNEGIE CENTER Address: City-St-Zip: SCOTCH PLAINS, NJ 07076 City-St-Zip: PRINCETON, NJ 08540 US Title: () Delete Title: ( ) Change (X) Addition MCELLIGOTT, ANN-MARIE Name: Name: 12 CORPORATE WOODS BLVD Address: Address: City-St-Zip: City-St-Zip: ALBANY, NY 12211 US

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: VITO PULITO VTD 02/20/2008