

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90267 050 ***150.00

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DOCUMENT # F97000000065

1. Entity Name

NOVARTIS ANIMAL HEALTH US, INC.

Principal Place of Business 3200 NORTHLINE AVE STE 300 GREENSBORO NC 37408 US	Mailing Address P O BOX 26402 GREENSBORO NC 27404-402 US
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C0052951



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address <i>3200 Northline Avenue</i> Suite, Apt. #, etc. <i>Suite 300</i> City & State <i>Greensboro, NC</i>
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4. FEI Number 56-2002553	Applied For <input type="checkbox"/> Not Applicable
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Zip 27408	Country	Zip 27408	Country US
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete NAEGELIN, URS 564 MORRIS AVE SUMMIT NJ 07901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete GUERTLER, HAN-BERT AH-1 CH-4002 BASLE SW 10020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete BARNETT, TERRY 564 MORRIS AVE SUMMIT NJ 07901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Delete MILLER, DALE A 3200 NORTHLINE AVE #300 GREENSBORO NC 27408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Delete POMERANTZ, ERIC 3200 NORTHLINE AVE #300 GREENSBORO NC 27408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete TV TOLER, DENNIS D 3200 NORTHLINE AVE #300 GREENSBORO NC 27408

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 608 Fifth Avenue New York, NY 10020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 608 Fifth Avenue New York, NY 10020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PD Position Open (currently filled by Novartis AH Management Team) 3200 Northline Avenue, Suite 300 Greensboro, NC 27408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition TV Glen Broadstreet 3200 Northline Avenue, Suite 300 Greensboro, NC 27408

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *E R A* **4/17/01** **(936) 381-1000**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)