

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006430

FILED
Apr 01, 2011
Secretary of State

Entity Name: ROCHE INSULIN DELIVERY SYSTEMS INC.

Current Principal Place of Business:

11800 EXIT FIVE PARKWAY
BLDG. U U
FISHERS, IN 46038

New Principal Place of Business:

Current Mailing Address:

11800 EXIT FIVE PARKWAY
BLDG. U U
FISHERS, IN 46038

New Mailing Address:

FEI Number: 41-1694999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATON 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: TREA
Name: WILSON, SCOTT D
Address: 9115 HAGUE ROAD
City-St-Zip: INDIANAPOLIS, IN 46256

Title: S
Name: GAGEL, LYNN
Address: 9115 HAGUE ROAD
City-St-Zip: INDIANAPOLIS, IN 46256

Title: GEN
Name: OLDHAM, STEVE A
Address: 9115 HAGUE ROAD
City-St-Zip: INDIANAPOLIS, IN 46256

Title: DIRE
Name: HUBBARD, SCOTT E
Address: 9115 HAGUE
City-St-Zip: INDIANAPOLIS, IN 79581

Title: VP
Name: BARNES, DAVID W
Address: 9115 HAGUE ROAD
City-St-Zip: INDIANAPOLIS, IN 46256

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: SCOTT D.WILSON

TREA

04/01/2011

Electronic Signature of Signing Officer or Director

Date