

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000117575

Entity Name: GRIFOLS USA, LLC

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2410 LILLYVALE AVENUE  
LOS ANGELES, CA 90032

**New Principal Place of Business:**

**Current Mailing Address:**

2410 LILLYVALE AVENUE  
LOS ANGELES, CA 90032

**New Mailing Address:**

FEI Number: 65-0606090

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GRIFOLS BIOLOGICALS INC.  
Address: 5555 VALLEY BOULEVARD  
City-St-Zip: LOS ANGELES, CA 90032

Title: CP  
Name: RICH, GREGORY G  
Address: 2410 LILLYVALE AVENUE  
City-St-Zip: LOS ANGELES, CA 90032

Title: DVP  
Name: DAVID, BELL I  
Address: 2410 LILLYVALE AVENUE  
City-St-Zip: LOS ANGELES, CA 90032

Title: T  
Name: DE BROUWER, MAXIME P  
Address: 2410 LILLYVALE AVENUE  
City-St-Zip: LOS ANGELES, CA 90032

Title: S  
Name: LAWRENCE, CHERYL  
Address: 2410 LILLYVALE AVENUE  
City-St-Zip: LOS ANGELES, CA 90032

Title: AS  
Name: PIERCE, DAVID C  
Address: 2410 LILLYVALE AVENUE  
City-St-Zip: LOS ANGELES, CA 90032

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID PIERCE

AS

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date