

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001030

FILED
Apr 28, 2009
Secretary of State

Entity Name: E.R. SQUIBB & SONS, L.L.C.

Current Principal Place of Business:

RTE. 206 & PROVINCELINE RD
PRINCETON, NJ 08540

New Principal Place of Business:

Current Mailing Address:

TAX DEPT. - 3RD FLOOR
345 PARK AVENUE
NEW YORK, NY 10154

New Mailing Address:

FEI Number: 13-6121983 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T 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: S () Delete
Name: VORA, SONIA
Address: 345 PARK AVE
City-St-Zip: NEW YORK, NY 10154

Title: TD () Delete
Name: GALIK, JEFFREY
Address: 345 PARK AVE
City-St-Zip: NEW YORK, NY 10154

Title: PD () Delete
Name: ANDREOTTI, LAMBERTO
Address: RTE. 206 & PROVINCELINE RD
City-St-Zip: PRINCETON, NJ 08543

Title: V () Delete
Name: LEWBEL, GARY
Address: 345 PARK AVE
City-St-Zip: NEW YORK, NY 10154

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: S (X) Change () Addition
Name: VORA, SONIA
Address: 777 SCUDDERS MILL ROAD
City-St-Zip: PLAINSBORO, NJ 08536

Title: TD (X) Change () Addition
Name: GALIK, JEFFREY
Address: ROUTE 206 & PROVINCELINE ROAD
City-St-Zip: PRINCETON, NJ 08543

Title: PD (X) Change () Addition
Name: HOOPER, ANTHONY
Address: 777 SCUDDERS MILL ROAD
City-St-Zip: PLAINSBORO, NJ 08536

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SPEAKER, MARK
Address: ROUTE 206 & PROVINCELINE ROAD
City-St-Zip: PRINCETON, NJ 08543

Title: VP () Change (X) Addition
Name: DE NOTARISTEFANI, CARLO
Address: 1 SQUIBB DRIVE
City-St-Zip: NEW BRUNSWICK, NJ 08903

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 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: GARY LEWBEL

VP

04/28/2009

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