

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90013 004 ***150.00

DOCUMENT # P06804

1. Entity Name

BAUSCH & LOMB PHARMACEUTICALS, INC.

Principal Place of Business

Mailing Address

**ONE BAUSCH & LOMB PLACE
C/O TAX DEPT
ROCHESTER NY 14604-2701
US**

**ONE BAUSCH & LOMB PLACE
C/O TAX DEPT
ROCHESTER NY 14604-2701
US**

00024047



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2551652

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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

Signature, typed or printed name of registered agent and title if applicable.

(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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FARINCINI, EILEEN 5023 SOUTHAMPTON CIRCLE TAMPA FL 33647	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Eileen Parinacci 8500 Hidden River Parkway Tampa, FL 33637	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MULLEN, ED BURGUNDER STRASSE DA 14129 BERLIN GE	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Treasurer Ed Mullen Brunsbitteler Damm 165-173 Postfach 200456/13851 Berlin, GERMANY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD JAROSZ, DAVID F. 17724 GREY EAGLE CIRCLE TAMPA FL 33647	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	David F. Jarosz 8500 Hidden River Parkway Tampa, FL 33637	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STILES, ROBERT B. 1010 ALLENS CREEK ROAD ROCHESTER NY 14618	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert B. Stiles One Bausch & Lomb Place Rochester, New York 14604	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RESNICK, ALAN H 4213 ST. PAUL BLVD. ROCHESTER NY	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Alan H. Resnick One Bausch & Lomb Place Rochester, New York 14604	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIEDHAMMER, THOMAS M 8500 HIDDEN RIVER PARKWAY TAMPA FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jean F. Geisel

2/14/00

Date

716-338-6000

Daytime Phone #

CR2E034 (9/99)

Attachment
C0024047

**BAUSCH & LOMB PHARMACEUTICALS, INC.
ROCHESTER, NEW YORK**

NAMES & ADDRESSES OF OFFICERS

Name and Title	Business Address
Thomas M. Riedhammer President	8500 Hidden River Parkway Tampa, FL 33637
Eileen Farinacci Vice President	8500 Hidden River Parkway Tampa, FL 33637
Alan H. Resnick Treasurer	One Bausch & Lomb Place Rochester, NY 14604-2701
Ed Mullen Assistant Treasurer	Brunsbütteler Damm 165-173 Postfach 200456 13851 Berlin, Germany
David F. Jarosz Assistant Secretary	8500 Hidden River Parkway Tampa, FL 33637

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BAUSCH & LOMB PHARMACEUTICALS, INC.

ROCHESTER, NEW YORK

NAMES AND ADDRESSES OF DIRECTORS

Name and Business Address

Thomas M. Riedhammer
8500 Hidden River Parkway
Tampa, FL 33637

David F. Jarosz
8500 Hidden River Parkway
Tampa, FL 33637

Robert B. Stiles
One Bausch & Lomb Place
Rochester, NY 14604-2701