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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11876

1. Corporation Name

NELCOR PURITAN BENNETT INCORPORATED

Principal Place of Business

675 MCDONNELL BLVD
HAZELWOOD MO 63042
US

Mailing Address

675 MCDONNELL BLVD
HAZELWOOD MO 63042
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/22/1986

4. FEI Number

94-2789249

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

16305 SWINGLEY RIDGE DR

27

Suite, Apt. #, etc.

ATTN: TAX DEPT.

28

City & State

CHESTERFIELD, MO

29

Zip

Country

30

U.S.

9. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE T ☐ DELETE

NAME VOLTOLINA, FRANK A.
STREET ADDRESS 675 MCDONNELL BLVD
CITY-ST-ZIP HAZELWOOD MO 63042

TITLE PCD ☒ DELETE

NAME LARKIN, C RAYMOND
STREET ADDRESS 100 WARWICK CT
CITY-ST-ZIP ALAMO CA

TITLE SVP ☒ DELETE

NAME SWEDLOW, DAVID B. M.D.
STREET ADDRESS 2165 CANTON OAK LANE
CITY-ST-ZIP DANVILLE CA

TITLE AT ☒ DELETE

NAME CALDWELL, MICHAEL J.
STREET ADDRESS 675 MCDONNELL BLVD
CITY-ST-ZIP HAZELWOOD MO 63042

TITLE V ☒ DELETE

NAME MIDDLEMAN, LEE M
STREET ADDRESS 16 COALMINE VIEW
CITY-ST-ZIP PORTOLA VALLEY CA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

16305 SWINGLEY RIDGE DRIVE
CHESTERFIELD, MO 63017-1777

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

P/D
JOHN HESSEMAN
675 MCDONNELL BLVD.
HAZELWOOD, MO 63042

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

V/S/D
ROGER A. KELLER
675 MCDONNELL BLVD.
HAZELWOOD, MO 63042

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

AT
JUDITH REBHOLZ
16305 SWINGLEY RIDGE DRIVE
CHESTERFIELD, MO 63017-1777

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

ASST. SECRETARY
ROBERT T. BUDENHOLZER
675 MCDONNELL BLVD
HAZELWOOD, MO 63042

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

V
MICHAEL A. ROCCA
675 MCDONNELL BLVD.
HAZELWOOD, MO 63042

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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

TREASURER

3/31/99

(314) 654-2000

Date

Daytime Phone #

CR2E034 (11/98)