2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13201

Mar 28, 2011 Secretary of State

FILED

Entity Name: MALLINCKRODT VETERINARY, INC.

Current Principal Place of Business: New Principal Place of Business:

675 MCDONNELL BOULEVARD ST. LOUIS, MO 63042

Current Mailing Address: New Mailing Address:

675 MCDONNELL BOULEVARD 15 HAMPSHIRE STREET ST. LOUIS, MO 63042 MANSFIELD, MA 02048

FEI Number: 36-3480465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US

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: PRES

Name: MEELIA, RICHARD J PRES Address: 15 HAMPSHIRE STREET City-St-Zip: MANSFIELD, MA 02048

Title: VPSD

Name: KAPPLES, JOHN W VPSECD Address: 15 HAMPSHIRE STREET City-St-Zip: MANSFIELD, MA 02048

Title: VPTD

Name: DASILVA, KEVIN G VPTREAD Address: 15 HAMPSHIRE STREET City-St-Zip: MANSFIELD, MA 02048

Title: VPD

Name: NICOLELLA, MATTHEW J VPDIR Address: 15 HAMPSHIRE STREET

City-St-Zip: MANSFIELD, MA 02048

Title: VP

Name: BOONE, JEFFREY S VP Address: 675 MCDONNELL BOULEVARD

City-St-Zip: ST. LOUIS, MO 63042

Title: VP

Name: BROWN, RICHARD G VP Address: 15 HAMPSHIRE STREET City-St-Zip: MANSFIELD, MA 02048

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: JOHN W. KAPPLES SEC 03/28/2011