FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P21224** **(1)**

1. Corporation Name

MALLINCKRODT, INC.

Principal Place of Business	Mailing Address
675 MCDONNELL BLVD HAZELWOOD MO 63042 US	TAX DEPARTMENT POST OFFICE BOX 5840 ST. LOUIS MO 63134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified	3a. Date of Last Report
10/10/1988	05/01/1994

2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 43-1386811	☐ Applied For ☐ Not Applicable
State, Apt. # or Suite 22	State, Apt. # or Suite 27	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 / County 25	Zip 29 / County 30	8. The corporation is liable for shareholder tax under s. 220.187, Florida Statutes. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 Section 607.1622(2), 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. The 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 607.325, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
Title	PD	Title	☐ Change ☐ Addition
Name	NICHOLS, MACK G	Name	
Street Address	16305 SWINGLEY RIDGE DR	Street Address	
City-State-Zip	CHESTERFIELD MO	City-State-Zip	
Title	AS	Title	☒ Change ☐ Addition
Name	~~DOUT, A. JACQUELINE~~	Name	Mary A. Palank
Street Address	~~7733 FORSYTH BLVD~~	Street Address	675 McDonnell Blvd
City-State-Zip	~~ST LOUIS MO~~	City-State-Zip	St. Louis, Mo 63042
Title	VD	Title	☒ Change ☐ Addition
Name	KELLER, ROGER A.	Name	
Street Address	~~2117 HILLSGATE CT.~~	Street Address	7733 Forsythe Blvd
City-State-Zip	~~ST. LOUIS MO~~	City-State-Zip	St. Louis, Mo 63105
Title	AS	Title	☒ Change ☐ Addition
Name	LARIMER, JAKE A.	Name	
Street Address	~~1640 FEATHERSTONE DR.~~	Street Address	16305 Swingley Ridge Drive
City-State-Zip	~~ST. LOUIS MO~~	City-State-Zip	Chesterfield, Mo 63017
Title	VT	Title	☐ Change ☐ Addition
Name	STONE, WILLIAM B.	Name	
Street Address	7733 FORSYTH BLVD	Street Address	
City-State-Zip	ST LOUIS MO	City-State-Zip	
Title	VD	Title	☐ Change ☐ Addition
Name	MOUSSA, ROBERT G	Name	
Street Address	675 MCDONNELL BLVD	Street Address	
City-State-Zip	HAZELWOOD MO	City-State-Zip	

14. I do hereby certify that the information supplied with this report is complete, accurate and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 1, or Block 14 if changed, or on any attachment with an address.

SIGNATURE: Ronald L Thompson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95 (314)895-2360
Date / Daytime Phone #

0468071 FP