

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90034 017 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P21429

1. Corporation Name
NEUTROGENA CORPORATION

Principal Place of Business 5755 WEST 96TH STREET LOS ANGELES CA 90045	Mailing Address 5760 W. 96TH ST. LOS ANGELES CA 90045 US
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/24/1988	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	30	4. FEI Number 95-2221471	Applied For Not Applicable
22 City & State	27	28 City & State	30	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	25	29	30	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NUGENT, JEFFREY M	1.2 NAME	
STREET ADDRESS	5760 WEST 96TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	1.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERLIN, K.A.	2.2 NAME	
STREET ADDRESS	ONE JOHNSON & JOHNSON PLAZA	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRUNSWICK NJ	2.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HILTON, J R	3.2 NAME	
STREET ADDRESS	1 JOHNSON & JOHNSON PLAZA	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRUNSWICK NJ	3.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REBACK, MITCH	4.2 NAME	
STREET ADDRESS	5760 W 96TH ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRUNSWICK NJ 90045	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHORT, D R	5.2 NAME	
STREET ADDRESS	5760 WEST 96TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA	5.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALIN, DONNA	6.2 NAME	
STREET ADDRESS	ONE JOHNSON & JOHNSON PLAZA	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRUNSWICK NJ 08933	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

Date

Daytime Phone #

SIGNATURE R. REBACK, V.P. Finance 2/10/99 (310) 642-1150

CR2E034 (11/98)

0553280

237890-90034-17
P21429

**Neutrogena Corporation
Officers & Directors**

President, COO	Jeffrey M. Nugent	5760 W. 96th Street Los Angeles, CA 90045
Exec. V.P. Operations & Finance	Donald Schort	5760 W. 96th Street Los Angeles, CA 90045
Sr. V.P., Sales & Customer Mktg.	Jim Collieran	5760 W. 96th Street Los Angeles, CA 90045
V.P.	Mitch Reback	5760 W. 96th Street Los Angeles, CA 90045
Exec. V.P., Global Marketing	Michael McNamara	5760 W. 96th Street Los Angeles, CA 90045
Secretary	D. Malin	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Assistant Secretary	K.A. Berlin	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Assistant Secretary	R. F. Biribauer	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Assistant Secretary	A.A. Ciamporcero	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Assistant Secretary	A.L. Colby	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Assistant Secretary	J.R. Hilton	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Assistant Secretary	M.G. Mangini	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Assistant Secretary	M.J. Ryan	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Assistant Secretary	S. Stern	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Director	D. Malin	One Johnson & Johnson Plaza New Brunswick, NJ 08933
Director	J.M. Nugent	5760 W. 96th Street Los Angeles, CA 90045
Director	B. W. Walsh	One Johnson & Johnson Plaza New Brunswick, NJ 08933