

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State
 05-16-2002 90040 001 ***150.00

05/16/02 AT

DOCUMENT # P26449
 1. Entity Name
G. D. SEARLE & CO.

Principal Place of Business Mailing Address
5200 OLD ORCHARD ROAD **5200 OLD ORCHARD ROAD**
SKOKIE IL 60077 **ATTN: TAX DEPARTMENT**
 SKOKIE IL 60077
 US

2. Principal Place of Business 3. Mailing Address
7000 PORTAGE RD. **7000 PORTAGE RD.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 TAX DEPT. 888-106

City & State City & State
KALAMAZOO MI **KALAMAZOO MI**
 Zip Country Zip Country
49001 **49001** **49001**

4. FEI Number Applied For
36-3399885 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional
 ☐ Fee Required

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (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, 2002 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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	DESCHUTTER, R U	
STREET ADDRESS	5200 OLD ORCHARD ROAD	
CITY-ST-ZIP	SKOKIE IL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	MICHELSON, J	
STREET ADDRESS	5200 OLD ORCHARD RD	
CITY-ST-ZIP	SKOKIE IL 60077	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BOGOMOLNY, R. L.	
STREET ADDRESS	5200 OLD ORCHARD ROAD	
CITY-ST-ZIP	SKOKIE IL	
TITLE	AT	<input checked="" type="checkbox"/> Delete
NAME	FEDERER, R.E.	
STREET ADDRESS	5200 OLD ORCHARD ROAD	
CITY-ST-ZIP	SKOKIE IL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HELLER, A.L.	
STREET ADDRESS	5200 OLD ORCHARD RD	
CITY-ST-ZIP	SKOKIE IL	
TITLE	AT	<input checked="" type="checkbox"/> Delete
NAME	BRADY, ROBERT L	
STREET ADDRESS	800 N LINDBERGH BLVD	
CITY-ST-ZIP	ST LOUIS MO 63167	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SPIERS, MARK S	
STREET ADDRESS	100 ROUTE 206 NORTH	
CITY-ST-ZIP	PEAPACK NJ 07977	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CAMPBELL, ARTHUR L.	
STREET ADDRESS	5200 OLD ORCHARD RD.	
CITY-ST-ZIP	SKOKIE IL 60077	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	REINSDORF, JUDITH A.	
STREET ADDRESS	100 ROUTE 206 NORTH	
CITY-ST-ZIP	PEAPACK NJ 07977	
TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	REENTS, SCOTT T.	
STREET ADDRESS	7000 PORTAGE RD.	
CITY-ST-ZIP	KALAMAZOO MI 49001	
TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEGEN, CARL H.	
STREET ADDRESS	7000 PORTAGE RD.	
CITY-ST-ZIP	KALAMAZOO MI 49001	
TITLE	AS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGENEL, JEAN M.	
STREET ADDRESS	100 ROUTE 206 NORTH	
CITY-ST-ZIP	PEAPACK NJ 07977	

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: *Roger L. Beglin* **SIGNATURE REQUIRED** **ROGER L. BEGLIN ASSIST TREAS** **4/25/02**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment Doc# P26479

G.D. SEARLE LLC
Officer and Directors

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>		
Mark S. Spiers	CEO, President, Director	100 Route 206 North Peapack	NJ	07977
Prabir Basu	Vice Chairman	5200 Old Orchard Road Skokie	IL	60077
Alexandra van Horne	Chairman, Treasurer, Director	100 Route 206 North Peapack	NJ	07977
Arthur L. Campbell	Vice President	5200 Old Orchard Road Skokie	IL	60077
Lynn D. Howard	Assistant Secretary	100 Route 206 North Peapack	NJ	07977
Jean M. Huguenel	Assistant Secretary	100 Route 206 North Peapack	NJ	07977
Judith A. Reinsdorf	Secretary, Director	100 Route 206 North Peapack	NJ	07977
Roger L. Beglin	Assistant Treasurer	100 Route 206 North Peapack	NJ	07977
Scott T. Reents	Assistant Treasurer	7000 Portage Road Kalamazoo	MI	49001
Carl H. Degen	Assistant Treasurer	7000 Portage Road Kalamazoo	MI	49001

as of 12/31/2001