

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91507 013 \*\*\*150.00

0649718 AT

**DOCUMENT # P35628**

1. Entity Name  
**ST. JUDE MEDICAL S.C., INC.**



1

Principal Place of Business  
**ONE LILLEHEI PLAZA  
ST. PAUL MN 55117**

Mailing Address  
**1 LILLEHEI PLAZA  
ATTN TAX DEPT  
ST. PAUL MN 55117  
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **41-1625029**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete  
NAME **ROSSEAU, MICHAEL T**  
STREET ADDRESS **11 MARLBORO LANE**  
CITY-ST-ZIP **BELL CANYON CA 91307**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VS** ☐ Delete  
NAME **O'MALLEY, KEVIN T**  
STREET ADDRESS **3037 EDGEWATER PLACE**  
CITY-ST-ZIP **WOODBURY MN 55127**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP **55125**

TITLE **VT** ☐ Delete  
NAME **KRENTZ, JAN E**  
STREET ADDRESS **4 RAVEN ROAD**  
CITY-ST-ZIP **NORTH OAKS MN 55127**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VP** ☒ Delete  
NAME **HEALEY, STEVEN J**  
STREET ADDRESS **4155 PRIMROSE PATH**  
CITY-ST-ZIP **VADNAIS HTS MN 55127**

TITLE ☐ Change ☒ Addition  
NAME **VP**  
STREET ADDRESS **ERIC FAIN**  
CITY-ST-ZIP **10 PRINCETON RD**  
**MENLO PARK, CA 94025**

TITLE **VP** ☐ Delete  
NAME **AMES, RICHARD**  
STREET ADDRESS **24956 NORMANIS WAY**  
CITY-ST-ZIP **CALABASAS CA 91302**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP **SEE ATTACHED**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**RECEIVED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/17/03**  
Date

**6514832000**  
Daytime Phone #

CR2E034 (10/02)

St. Jude Medical S.C., Inc.

41-1625029

Attachment 10089588

Corporate Officers

TITLE	NAME	ADDRESS
P	Michael T. Rousseau	11 Marlboro Lane Bell Canyon, CA 91307
V	Richard Ames	24956 Normanis Way Calabasas, CA 91302
V	Jane Song	6312 Marina Pacifica Long Beach, CA 90803
V	Robert M. Mattioli	148 Maynard Farm Rd. Sudbury, MA 01776
V	Eric Fain	10 Princeton Rd Menlo Park, CA 94025
V	Jim Gantz	3087 Spencer Hill Lane Cincinnati, OH 45226
V	John Grubiak	332 Carpenter Ave. Sea Cliff, NY 11579
V	Walter Frischner	33 Marlboro Lane Bell Canyon, CA 91307
V	Mike Hardage	5602 Wooded Villas Kingwood, TX 77345
V/T	Jan E. Krentz	4 Raven Road North Oaks, MN 55127
V/S	Kevin T. O'Malley	3037 Edgewater Place Woodbury, MN 55125
V	James W. A. Ladner	1414 Tyroll Trail So. Golden Valley, MN 55416
V	Ronald G. Rolnick	7560 Devista Drive Los Angeles, CA 90046

St. Jude Medical S.C., Inc.

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Directors

TITLE	NAME	RESIDENTIAL ADDRESS
D	Jan E. Krentz	4 Raven Road North Oaks, MN 55127
D	Kevin T. O'Malley	3037 Edgewater Place Woodbury, MN 55125
D	John C. Heinmiller	9059 Larkspur Ln. Eden Prairie, MN 55347