

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

FILED  
May 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P36072 (7)  
1. Corporation Name  
DEKNATEL, INC.



Principal Place of Business 600 AIRPORT RD FALL RIVER MA 02720 US	Mailing Address 600 AIRPORT RD FALL RIVER MA 02720 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/28/1991	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 04-3132370	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYES STREET TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent	
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 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOW, WILLIAM	1.2 NAME	
STREET ADDRESS	600 AIRPORT RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	FALL RIVER MA	1.4 CITY-ST-ZIP	See Attached
TITLE	VAS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SVKHART, ROBERT	2.2 NAME	
STREET ADDRESS	140 RIVERSIDE DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEGON, LEWIS	3.2 NAME	
STREET ADDRESS	600 AIRPORT RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	FALL RIVER MA	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FARRAR, QUINTON J	4.2 NAME	
STREET ADDRESS	600 AIRPORT RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	FALL RIVER MA	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE \_\_\_\_\_

CR2E034 (10/97)

**Attachment A**

**GENZYME SURGICAL PRODUCTS CORPORATION**

**04-3132370**

**Effective 01/09/98**

**Directors  
Name**

**Residential  
Address**

**Business  
Address**

Name	Business Address	Residential Address
George J. Schulte 331-42-8188	One Kendall Square Cambridge, MA 02139	6 Kenilworth Road Wellesley, MA 02181
David J. McLachlan 031-28-1828	One Kendall Square Cambridge, MA 02139	51 Brentwood Street Chelmsford, MA 01824
G. Jan Van Heek 347-80-8974	One Kendall Square Cambridge, MA 02139	Isaac Da Costalaan 34 1404 BJ Bussum The Netherlands

Attachment A

GENZYME SURGICAL PRODUCTS CORPORATION

04-3132370

Effective 01/09/98

**Officers**

<b>Name</b>	<b>Residential Address</b>	<b>Business Address</b>
<b>George J. Schulte</b> President 331-42-8188	6 Kenilworth Road Wellesley, MA 02181	One Kendall Square Cambridge, MA 02139
<b>Earl Hall</b> 124-32-0019 VP-WW Manufacturing Secretary	140 Lake Ridge Drive Taunton, MA 02780	600 Airport Road Fall River, MA 02720
<b>Quinton J. Farrar</b> 005-64-7562 VP-Technology, Q.A. & R.A.	11 Colleen Drive Lakeville, MA 02346	600 Airport Road Fall River, MA 02720
<b>Henry Rossell</b> 145-50-6501 VP-Sales	109 Wakefield Dr NE Atlanta Ga 30309	5175 South Royal Atlanta Dr. Tucker, GA 30084
<b>Timothy Thomas</b> 451-04-1393 VP/Asst. Sec'y Tucker Operations	70 Westfield Drive East Greenwich, RI 02818	600 Airport Road Fall River, MA 02720
<b>John R. Connolly</b> 080-44-5689 Chief Operation Officer	160 Pino Verde Lane Williamsville, NY 14221	600 Airport Road Fall River, MA 02720
<b>Robert E. Pelletier</b> 013-44-7306 Vice President, Operations	41 Lancashire Drive Mansfield, MA 02048	600 Airport Road Fall River, MA 02720
<b>John B. Gilsdorf</b> 402-62-8609 Executive VP	9625 Huntcliff Trace Atlanta, GA 30350	5175 South Royal Atlanta Tucker, GA 30084