

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000051704

Entity Name: WEST PHARMACEUTICAL SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

1160 53RD ST NORTH
CLEARWATER, FL 34620

Current Mailing Address:

1160 53RD ST NORTH
CLEARWATER, FL 34620 US

FEI Number: 52-1834733

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SD
Name BUSHEY, RACHEL M
Address 530 HERMAN O WEST DR
City-State-Zip: EXTON PA 19341

Title VP, TREASURER
Name ANDERSON, MICHAEL A
Address 530 HERMAN O WEST DR
City-State-Zip: EXTON PA 19341

Title P
Name MCCLEERY, FREDRICK S
Address 1160 53RD ST NORTH
City-State-Zip: CLEARWATER FL 34620

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RACHEL M BUSHEY

SECRETARY

04/23/2013

Electronic Signature of Signing Officer/Director Detail

Date