

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 820400

Entity Name: BAXTER HEALTHCARE CORPORATION**Current Principal Place of Business:**ONE BAXTER PARKWAY
DEERFIELD, IL 60015**Current Mailing Address:**ONE BAXTER PARKWAY
DEERFIELD, IL 60015 US**FEI Number:** 36-2604143**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name GRADE, JOEL T.
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VICE PRESIDENT AND ASSISTANT
TREASURER
Name FLEMING, CHRISTINE
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title DIRECTOR
Name KNIGHT, HEATHER
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP
Name RANGAN, VIJAY
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VICE PRESIDENT AND ASSISTANT
CONTROLLER
Name HEINE, BERNARD
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP
Name RUSHFORD, JON
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP
Name YOUNG, THOMAS
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title ASSISTANT SECRETARY
Name BERGHOFF, ETHAN
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

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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: KIMBERLY OLSON**ASSISTANT SECRETARY 03/26/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name BRILL, VANESSA
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title ASSISTANT SECRETARY
Name PADGITT, SARAH
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP
Name BARRUOS, MARITZA
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP, HUMAN RESOURCES
Name MASON, JEANNE K.
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP, CHIEF SUPPLY CHAIN OFFICER
Name BORZI, JAMES
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP, TAX
Name BAILEY, DAVID
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VICE PRESIDENT AND GENERAL COUNSEL
Name ROSENBLOOM, DAVID S.
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VICE PRESIDENT AND GROUP PRESIDENT,
HEALTHCARE SYSTEMS & TECHNOLOGIES
Name RASUL, REAZUR
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VICE PRESIDENT AND CHIEF FINANCIAL
OFFICER
Name GRADE, JOEL T.
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title ASSISTANT SECRETARY
Name OLSON, KIMBERLY
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP
Name HOLLAND, SEJLA
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VP
Name CRUZ, SHELLY
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VICE PRESIDENT AND TREASURER
Name LEETS, KAREN L.
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VICE PRESIDENT AND SECRETARY
Name BRADFORD, ELLEN K.
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title DIRECTOR
Name ROSENBLOOM, DAVID S.
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title CHIEF EXECUTIVE OFFICER AND
PRESIDENT
Name KNIGHT, HEATHER
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015

Title VICE PRESIDENT AND GROUP
PRESIDENT, PHARMACEUTICALS
Name SONIG, ALOK
Address ONE BAXTER PARKWAY
City-State-Zip: DEERFIELD IL 60015