

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002455

Entity Name: HEARTWARE, INC.**Current Principal Place of Business:**500 OLD CONNECTICUT PATH
BUILDING A
FRAMINGHAM, MA 01701**Current Mailing Address:**500 OLD CONNECTICUT PATH
BUILDING A
FRAMINGHAM, MA 01701 US**FEI Number:** 55-0828419**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	ASST. SECRETARY
Name	ZIEBELL, ANNE M.
Address	710 MEDTRONIC PARKWAY
City-State-Zip:	MINNEAPOLIS MN 55432

Title	PRESIDENT
Name	NJOKU, NNAMDÌ
Address	8200 CORAL SEA STREET NE,
City-State-Zip:	MOUNDS VIEW MN 55112

Title	VP, TREASURER, DIRECTOR
Name	BRISTOW, JASON M.
Address	710 MEDTRONIC PARKWAY
City-State-Zip:	MINNEAPOLIS MN 55432

Title	VP, ASSISTANT SECRETARY, DIRECTOR
Name	HA, MARTHA
Address	710 MEDTRONIC PARKWAY
City-State-Zip:	MINNEAPOLIS MN 55432

Title	DIRECTOR
Name	OLDAKER, JULIAN
Address	500 OLD CONNECTICUT PATH BUILDING A
City-State-Zip:	FRAMINGHAM MA 01701

Title	SECRETARY
Name	OSTRAAS, THOMAS
Address	500 OLD CONNECTICUT PATH BUILDING A
City-State-Zip:	FRAMINGHAM MA 01701

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: THOMAS OSTRAAS**AUTHORIZED PERSON****04/18/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date