## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006204

Entity Name: GIVEN IMAGING, INC.

**Current Principal Place of Business:** 

15 HAMPSHIRE STREET MANSFIELD. MA 02048

**Current Mailing Address:** 

15 HAMPSHIRE STREET MANSFIELD, MA 02048 US

FEI Number: 58-2529746 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

FILED Apr 21, 2014

**Secretary of State** 

CC5332378073

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR, SECRETARY
Name HANSON, BRYAN Name KAPPLES, JOHN W

Address 555 LONG WHARF DRIVE Address 15 HAMPSHIRE STREET

City-State-Zip: MANSFIELD MA 02048 City-State-Zip: MANSFIELD MA 02048

Title TREASURER Title VP, DIRECTOR

NameANDRULONIS, GREGORYNameNICOLELLA, MATTHEW JAddress15 HAMPSHIRE STREETAddress15 HAMPSHIRE STREETCity-State-Zip:MANSFIELD MA 02048City-State-Zip: MANSFIELD MA 02048

Title DIR

Name KUPFERSCHMID, GREGORY
Address 15 HAMPSHIRE STREET
City-State-Zip: MANSFIELD MA 02048

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: JOHN W. KAPPLES

Electronic Signature of Signing Officer/Director Detail

**SECRETARY** 

04/21/2014

Date