

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000003951

**Entity Name:** MEAD JOHNSON NUTRITION COMPANY

**Current Principal Place of Business:**

2701 PATRIOT BOULEVARD  
GLENVIEW, IL 60026

**Current Mailing Address:**

2701 PATRIOT BOULEVARD  
GLENVIEW, IL 60026 US

**FEI Number:** 80-0318351

**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            PRESIDENT, DIRECTOR  
Name            JAKOBSEN, PETER KASPER  
Address        2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title            SECRETARY  
Name            SHELLER, PATRICK M.  
Address        2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title            DIRECTOR  
Name            SIGAL, ELLIOTT MD  
Address        2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title            DIRECTOR  
Name            BERNICK, HOWARD B.  
Address        2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title            DIRECTOR  
Name            GOLSBY, STEPHEN W.  
Address        2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title            DIRECTOR  
Name            CATALANO, ANNA CHENG  
Address        2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title            DIRECTOR  
Name            RATCLIFFE, PETER G.  
Address        2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title            DIRECTOR  
Name            SINGER, ROBERT S.  
Address        2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

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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:** PATRICK M. SHELLER

**SECRETARY**

**04/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GROBSTEIN, MICHAEL  
Address 2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title DIRECTOR  
Name CLARK, CELESTE A. PH.D.  
Address 2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title DIRECTOR  
Name ALTSCHULER, STEVEN M. MD  
Address 2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title DIRECTOR  
Name SHERMAN, MICHAEL A.  
Address 2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026

Title DIRECTOR  
Name CASIANO, KIMBERLY A.  
Address 2701 PATRIOT BOULEVARD  
City-State-Zip: GLENVIEW IL 60026