2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2014
Secretary of State
CC1363068784

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Entity Name: MISSION PHARMACAL COMPANY

Current Principal Place of Business:

38505 IH 10 WEST
BOERNE, TX 78006

Current Mailing Address:

PO BOX 786099
SAN ANTONIO, TX 78278

FEI Number: 74-1041775

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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	CD
Name	WALSDORF, NEILL B
Address	11111 DREAMLAND
City-State-Zip:	SAN ANTONIO TX 78230

Title	PD
Name	WALSDORF, NEILL BJR
Address	PO BOX 786099
City-State-Zip:	SAN ANTONIO TX 78278

Title	VPD
Name	WALSDORF, JAMES K
Address	1246 E BITTERS RD
City-State-Zip:	SAN ANTONION TX 78216

Title	TD
Name	WALSDORF, BEVERLY A
Address	11111 DREAMLAND
City-State-Zip:	SAN ANTONIO TX 78230

Title	SD
Name	YOUNGBLOOD, BENJAMIN III
Address	8207 CALLAGHAN RD #100
City-State-Zip:	SAN ANTONIO TX 78230

Title	ASD
Name	DOOLEY, THOMAS J
Address	2002 VIA VINEDA
City-State-Zip:	SAN ANTONIO TX 78258

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 J. DOOLEY DIRECTOR 01/08/2014

Electronic Signature of Signing Officer/Director Detail — Date