

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005669

Entity Name: SHERWOOD MEDICAL COMPANY I

Current Principal Place of Business:

15 HAMPSHIRE STREET
MANSFIELD, MA 02048

Current Mailing Address:

710 MEDTRONIC PARKWAY
MINNEAPOLIS, MN 55432 US

FEI Number: 02-0502159

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

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

Title VP
Name VORGERT, TIM
Address 15 HAMPSHIRE STREET
City-State-Zip: MANSFIELD MA 02048

Title ASSISTANT SECRETARY
Name OSTERAAS, THOMAS
Address 15 HAMPSHIRE STREET
City-State-Zip: MANSFIELD MA 02048

Title PRESIDENT
Name WHITE, ROBERT J
Address 6165 GUNBARREL AVE
City-State-Zip: BOULDER CO 80301

Title VP
Name BEATON, THOMAS A.
Address 15 HAMPSHIRE STREET
City-State-Zip: MANSFIELD MA 02048

Title VP, ASST. TREASURER
Name QUINTUS, SHEILA
Address 710 MEDTRONIC PARKWAY
City-State-Zip: MINNEAPOLIS MN 55432

Title VP, ASST. SECRETARY
Name GREFF, SALIHA
Address 15 HAMPSHIRE STREET
City-State-Zip: MANSFIELD MA 02048

Continues on page 2

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 OSTERAAS

ASSISTANT SECRETARY 04/18/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name DUFT, PATRICIA HITT
Address 15 HAMPSHIRE STREET
City-State-Zip: MANSFIELD MA 02048

Title VP, CFO
Name PARKHILL, KAREN L.
Address 710 MEDTRONIC PARKWAY
City-State-Zip: MINNEAPOLIS MN 55432

Title VP
Name WILLS, COURTNEY NELSON
Address 8200 CORAL SEA STREET NE
City-State-Zip: MOUNDS VIEW MN 55112

Title VP
Name BONAGURO, MARK
Address 15 HAMPSHIRE STREET
City-State-Zip: MANSFIELD MA 02048

Title VP, CONTROLLER
Name KIRK, JENNIFER
Address 710 MEDTRONIC PARKWAY
City-State-Zip: MINNEAPOLIS MN 55432