No. C 173663		Due no later than Jun 30, 2018		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CORPORATION SERVICE COMPANY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CENTURION MEDICAL PRODUCTS CORPORATION 3 LAKES DR NORTHFIELD IL 60093		12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE				J. <u>Hew</u> Registered	a rigene o	igria car c.		
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pi	resident, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	ANDREW J MILLS		100 CENTURION WAY	WILLIAMSTON	MI	USA	48895	
DIRECTOR	CHARLES N MILLS		3 LAKES DR	NORTHFIELD	IL	USA	60093	
DIRECTOR	JAMES D ABRAMS		3 LAKES DR	NORTHFIELD	IL	USA	60093	
VICE PRESIDENT	ICE PRESIDENT JOHN T BAUER		3 LAKES DR	NORTHFIELD	IL	USA	60093	
TREASURER	JAMES D ABRAMS		3 LAKES DR	NORTHFIELD	IL	USA	60093	
PRESIDENT	JAMES MATTHEW PIGOTT		100 CENTURION WAY	WILLIAMSTON	MI	USA	48895	
SECRETARY	JAMES D A	BRAMS	3 LAKES DR	NORTHFIELD	IL	USA	60093	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
MI		Signature: ALEXANDER M LIBERMAN		Date: 05/24/2018				
C 173663		Name (type or print): ALEXANDER M LIBERMAN		Title: ASSISTANT SECRETARY				
Processed 05/24/2018 * Electronically provided signatures are accepted as original signatures.								