

No. <b>C 127784</b>		Due no later than Mar 31, 2010 <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> SHERWOOD MEDICAL COMPANY I 15 HAMPSHIRE STREET MANSFIELD MA 02048		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	RICHARD J MEELIA	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048
SECRETARY	JOHN W KAPPLES	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048
TREASURER	KEVIN G DASILVA	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048
DIRECTOR	MATTHEW J NICOLELLA	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048
DIRECTOR	JOHN W KAPPLES	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048
DIRECTOR	KEVIN G DASILVA	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048
5. Organized Under the Laws of: <b>DE C 127784</b>		6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann		Date: 01/29/2010 Title: Poa		
Processed 01/29/2010		* Electronically provided signatures are accepted as original signatures.				