No. <b>C 127784</b>		Due no later than Mar 31, 2008 Annual Report Form  1. Mailing Address: Correct in this box if needed.  SHERWOOD MEDICAL COMPANY I TYCO TAX DEPT.  15 HAMPSHIRE STREET MANSFIELD MA 02048		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)  CT CORPORATION SYSTEM  1111 W JEFFERSON STE 530  BOISE ID 83702- USA  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DLE DATE				1111 W JEFFE BOISE ID 83 USA				
		ess Addresses of P	resident, Secretary, and Directors. Treasu	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	MATTHEW J. NICOLELLA		15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048	
PRESIDENT	RICHARD J.	MEELIA	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048	
SECRETARY	JOHN W. KA	APPLES	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048	
TREASURER	KEVIN G. DA	ASILVA	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048	
DIRECTOR	KEVIN G. DA	ASILVA	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048	
DIRECTOR	JOHN W. KA	APPLES	15 HAMPSHIRE STREET	MANSFIELD	MA	USA	02048	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: Jennifer Spangler		Date	Date: 02/24/2008			
C 127784		Name (type or print): Jennifer Spangler		Title:	Title: Power of Attorney			
Processed 02/24/2008 * Electronically provided signatures are accepted as original signatures.								