

No. <b>C 84030</b>		<b>Due no later than Jun 30, 2015</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> BAXTER HEALTHCARE CORPORATION SHIRLEY TWINE TAX DIVISION P.O. BOX 703 DEERFIELD IL 60015 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705		
				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	ROBERT L PARKINSON, JR.	ONE BAXTER PARKWAY	DEERFIELD	IL	USA	60015-0703
SECRETARY	DAVID SCHARF	ONE BAXTER PARKWAY	DEERFIELD	IL	USA	60015-0703
TREASURER	TODD YOUNG	ONE BAXTER PARKWAY	DEERFIELD	IL	USA	60015-0703
DIRECTOR	DAVID SCHARF	ONE BAXTER PARKWAY	DEERFIELD	IL	USA	60015-0703
5. Organized Under the Laws of:  <b>DE C 84030</b>		6. Annual Report must be signed.* Signature: Norman Richter Name (type or print): Norman Richter Date: 04/20/2015 Title: Asst. Treasurer				
Processed 04/20/2015		* Electronically provided signatures are accepted as original signatures.				