

## State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

# Foreign Business Corporation Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2014

1. Corporate ID No. 000100739

2. Name of Corporation PSS World Medical, Inc.

3. Street Address Principal Business Office:

No. and Street: ONE POST STREET

35TH FLOOR

City or Town: SAN FRANCISCO State: CA Zip: 94104 Country: USA

4. Business Phone No.

5. State of Incorporation

State: FL

6. Brief Description of the Character of Business Conducted in Rhode Island

#### THE SALE AND DISTRIBUTION OF MEDICAL SUPPLIES.

#### 7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT, CEO	GARY A CORLESS	ONE POST STREET 35TH FLOOR SAN FRANCISCO, CA 94104 USA	
VICE PRESIDENT , SECRETARY	WILLIE C BOGAN	ONE POST STREET 35TH FLOOR SAN FRANCISCO, CA 94104 USA	
VICE PRESIDENT, TREASURER	TODD E BALDANZI	450 LINDBERGH DRIVE MOON TOWNSHIP, PA 15108 USA	
DIRECTOR	STANTON J MCCOMB	8741 LANDMARK ROAD RISHMOND , VA 23228 USA	

DIRECTOR	TODD E BALDANZI	450 LINDBERGH DRIVE MOON TOWNSHIP, PA 15108 USA	
DIRECTOR	WILLIE C BOGAN	ONE POST STREET 35TH FLOOR SAN FRANCISCO, CA 94104 USA	

#### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares
PWP		\$0.0100	1,000,000.00	0
CWP		\$0.0100	150,000,000.00	50313887

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

**Signed this 28 Day of January, 2014 at 12:50:15 PM.** This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

### By WILLIE C BOGAN

Signature of Authorized Representative of the Corporation

#### **SECRETARY**

Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630 Revised 09/07

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