RALPH MOIL	ate of Rhode Island a Office of the S	and Providence Pl Secretary of State	antations	Fee: \$50.(	
Recretary of State	148 W. Providence	Business Services River Street RI 02904-2615 222-3040			
Business Corporation Annual Report Filing Period: January 1 - Ma					
n accordance with R.I.G.L. 7 nnual report within thirty (30 c&d)) is subject to a penalty	)) days after the time presci				
ANNUAL REPORT YEAR:	2014				
1. Corporate ID No. <u>0</u>	00101523				
2. Name of Corporation	MEDSOURCE, INC.				
3. Street Address Principa	I Business Office:				
No. and Street: <u>86 DAN</u> City or Town: <u>TIVER</u>	<u>NIEL T. CHURCH ROAI TON</u>	_	ip: <u>02878</u> Cour	ntry: <u>USA</u>	
4. Business Phone No.					
401-624-2400					
5. State of Incorporation					
State: <u>RI</u>					
6. Brief Description of the	Character of Business C	onducted in Rhode Is	land		
MEDICAL PRODUCT D	ISTRIBUTION				
7. Names and Addresses	of the Officers and Direct	ors:			
	rs must be listed. If office jer applicable; please de		ave been elected	, the title	
Title	Individual Nar		Address		
PRESIDENT	First, Middle, Last, S KEVIN BOULAY		Address, City or Town, State, Zip Code, Country 86 DANIEL T. CHURCH ROAD		
			'ERTON, RI 02878- US		
8. Shares Authorized and	Issued				
				Total Issued	
Class of Stock	Series of Stock	Par Value Per Share	Total Authorized	and Outstanding	

		Shares Number of Shares	Num of Shares
STK	\$0.0000	5,000.00	0

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 20 Day of March, 2014 at 4:19:28 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 KEVIN BOULAY

Signature of Authorized Representative of the Corporation

PRESIDENT

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

 $\textcircled{\mbox{\sc only}}$  2007 - 2014 State of Rhode Island and Providence Plantations All Rights Reserved