



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **23300** 2. Name of Corporation **DAVOL INC.**

3. Street Address Principal Business Office
730 Central Avenue City Murray Hill State N.J. Zip 07974

4. Business Phone No. (908) 277-8296 5. State of Incorporation **DELAWARE** 6. SIC Code **1883**

7. Brief Description of the Character of Business Conducted in Rhode Island
Manufacturer of Healthcare Products

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) X

President Name John H. Weiland Street Address 395 Princeton Avenue City Brick State N.J. Zip 08724	Vice President Name Brian P. Kelly Street Address 10 Birchtree Lane City Sandy State UT Zip 84092
Secretary Name Richard A. Flink Street Address 3 Summer Lane City Califon State N.J. Zip 07830	Treasurer Name Earle L. Parker Street Address 44 Deer Creek Drive City Basking Ridge State N.J. Zip 07920

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name William C. Bopp Street Address 85 Maple Street City Summit State N.J. Zip 07901	Director Name Richard A. Flink Street Address 3 Summer Lane City Califon State N.J. Zip 07830
Director Name John H. Weiland Street Address 395 Princeton Avenue City Brick State N.J. Zip 08724	Director Name Benson F. Smith Street Address 16 Henry Drive City Chatham State N.J. Zip 07928

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES	ISSUED SHARES
Number of Shares	Number of Shares
Class/Series	Class/Series
Par Value	Par Value
100 Common	100 Common

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: _____
Check No.: _____
By: _____
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer _____ Date 2/18/97
Earle L. Parker
Print or Type Name of Officer
Treasurer
Title of Officer

DAVOL, INC.
FEIN: 05-0317655

OFFICERS

<i>Name</i>	<i>Title</i>	<i>Address</i>
John H. Weiland	President	395 Princeton Avenue Brick, NJ 08724
Brian P. Kelly	Vice-President	10 Birchtree Lane Sandy, UT 84092
James A. Miraldi	Vice President - Controller	8 Fletcher Lane Foxboro, MA 02035
Edward F. Doorley III	Vice President - Manufacturing	104 Blueberry Drive E. Greenwich, RI 02818
Leonard A. DiLorenzo	Vice President - QA	42 Laurel Ridge Lane N. Kingstown, RI 02852
William C. Bopp	Vice President - Finance	85 Maple Street Summit, NJ 07901
Richard A. Flink	Secretary	3 Summer Lane Califon, NJ 07830
Earle L. Parker	Treasurer	44 Deer Creek Drive Basking Ridge, NJ 07920
Jean F. Miller	Assistant Secretary	270 Muriel Avenue North Plainfield, NJ 07060

DIRECTORS

<i>Name</i>	<i>Address</i>
William C. Bopp	85 Maple Street, Summit, NJ 07901
Richard A. Flink	3 Summer Lane, Califon, NJ 07830
John H. Weiland	395 Princeton Ave., Brick, NJ 08724
Benson F. Smith	16 Henry Drive, Chatham, NJ 07928