| State | of Rhode Island and Pro Office of the Secreta | | Fee: \$50.00 | | | | |
|--|---|---|---|--|--|--|--|
| Division Of Business Services 148 W. River Street | | | | | | | |
| Providence RI 02904-2615 (401) 222-3040 | | | | | | | |
| Foreign Business Corpor Annual Report Filing Period: January 1 - March a | | | | | | | |
| In accordance with R.I.G.L. 7-1.2 annual report within thirty (30) da (c&d)) is subject to a penalty fee | ys after the time prescribed by I | | | | | | |
| ANNUAL REPORT YEAR: 2017 | | | | | | | |
| 1. Corporate ID No. 000060204 | | | | | | | |
| 2. Name of Corporation <u>Nestle HealthCare Nutrition, Inc.</u> | | | | | | | |
| 3. Street Address Principal Bu | siness Office: | | | | | | |
| | LAND ROAD M PARK State: | <u>NJ</u> Zip: <u>07932</u> Count | ry: <u>USA</u> | | | | |
| 4. Business Phone No. | | | | | | | |
| <u>973-593-7500</u> | | | | | | | |
| 5. State of Incorporation | | | | | | | |
| State: <u>DE</u> | | | | | | | |
| | ARTICLE III | | | | | | |
| Using the following NAICS code | s, please select the code that b | est describes your business. | | | | | |
| NAICS Code <u>31-33</u> | | | | | | | |
| 6. Brief Description of the Character of Business Conducted in Rhode Island | | | | | | | |
| SALES OF CLINICAL DIETARY AND INSTITUTIONAL FOODS | | | | | | | |
| 7. Names and Addresses of th | 7. Names and Addresses of the Officers and Directors: | | | | | | |
| All officers and directors m | ust be listed. | | | | | | |
| Title | Individual Name | Address | Contraction of the second s | | | | |
| SECRETARY | First, Middle, Last, Suffix JAMES PEPIN | Address, City or Town, State, Zip C 12 VREELAND RC FLORHAM PARK, NJ 07932 | DAD | | | | |
| DIR OF RISK MGMT | DAVID BINDER | 900 LONG RIDGE R STAMFORD, CT 06902 L | OAD | | | | |

| DIRECTOR | JUAN OCHOA | 12 VREELAND ROAD FLORHAM PARK, NJ 07932 USA | |
|--|-------------------|--|--|
| ASSISTANT TREASURER | ALEXANDER SPITZER | 383 MAIN AVE, 5TH FLOOR NORWALK, CT 06851 USA | |
| ASSISTANT TREASURER | LINDA J BRODIE | 800 NORTH BRAND BLVD GLENDALE, CA 91203 USA | |
| ASSISTANT TREASURER | MICHAEL DAVIS | 383 MAIN AVE, 5TH FLOOR NORWALK, CT 06851 USA | |
| ASSISTANT TREASURER | GARY KIRSCHENBAUM | 383 MAIN AVE, 5TH FLOOR NORWALK, CT 06851 USA | |
| CHIEF MEDICAL OFFICER | JUAN OCHOA | 12 VREELAND ROAD FLORHAM PARK , NJ 07932 USA | |
| PRESIDENT & REGIONAL BUSINESS HEAD, CONSUMER CARE | BARBARA MCCARTNEY | 12 VREELAND ROAD FLORHAM PARK, NJ 07932 USA | |
| DIRECTOR | BARBARA MCCARTNEY | 12 VREELAND ROAD FLORHAM PARK, NJ 07932 USA | |
| ASSISTANT TREASURER | ALAN PASETSKY | 383 MAIN AVE, 5TH FLOOR NORWALK, CT 06851 USA | |
| DIRECTOR | PAUL BRITTON | 12 VREELAND ROAD FLORHAM PARK, NJ 07932 USA | |
| VICE PRESIDENT | PAUL BRITTON | 12 VREELAND ROAD FLORHAM PARK, NJ 07932 USA | |
| REGIONAL BUSINESS HEAD, MEDICAL NUTRITION | ANNA MOHL | 12 VREELAND ROAD FLORHAM PARK, NJ 07932 USA | |
| DIRECTOR | ANNA MOHL | 12 VREELAND ROAD FLORHAM PARK, NJ 07932 USA | |
| TREASURER | KEVIN YI | 800 NORTH BRAND BLVD GLENDALE, CA 91203 USA | |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | | Total Issued and Outstanding <i>Num of</i> <i>Shares</i> |
|----------------|-----------------|---------------------|------------|--|
| CWP | | \$1.0000 | 500,000.00 | 50000 |

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 27 Day of February, 2017 at 1:19:14 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 MICHAEL DAVIS

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

 $\ensuremath{\mathbb{C}}$ 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved