



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 96126		2. Name of Corporation HAEMONETICS CORPORATION		
3. Street Address Principal Business Office 400 Wood Rd		City Braintree	State MA	Zip 02184
4. Business Phone No. 781-248-7100		5. State of Incorporation MASSACHUSETTS		6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island SALES AND SERVICE OF BLOOD PROCESSING EQUIPMENT.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Brad Nutter		Vice President Name Ronald J. Ryan		
Street Address 400 Wood Rd		Street Address 400 Wood Rd		
City Braintree	State MA	Zip 02184	City Braintree	State MA
Secretary Name Alicia R. Lopez		Treasurer Name (Same as above)		
Street Address 400 Wood Road		Street Address		
City Braintree	State MA	Zip 02184	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Brad Nutter		Director Name Ronald A. Matricaria		
Street Address 118 Huntington Ave Apt 1104		Street Address 9167 E. Happy Hollow Dr		
City Boston	State MA	Zip 02116	City Scottsdale	State AZ
Director Name Ronald Gelbman		Director Name Benjamin L. Holmes		
Street Address <del>177 Black River</del> 457 Meadowlark Dr		Street Address 126 Deer Run		
City Sarasota	State FL	Zip 07853	City Ketchum	State ID
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
80,000,000 COMM \$0.01 PAR VALUE			32,447,910	Common

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



\*96126\*

File Date	2-1-05
Check No.	57864
By:	<i>[Signature]</i>
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]* 1/17/05  
Signature of Officer Date  
Alicia R. Lopez  
Print or Type Name of Officer  
Secretary  
Title of Officer

**HAEMONETICS CORPORATION****Listing of Officers and Board of Directors – 2004****OFFICERS:**

Ronald A. Matricaria	Chairman of the Board	9167 E. Happy Hollow Drive; Scottsdale, AZ 85262
Brad Nutter	President and CEO	118 Huntington Ave., Boston, MA 02116
Alicia R. Lopez	Clerk	87 Chapman Street, Canton, MA 02021
Ronald J. Ryan	Treasurer & Asst. Clerk	19 Suffolk Road, Sudbury, MA 01775

**BOARD OF DIRECTORS****EXPIRATION OF TERM**

Susan Bartlett Foote, JD	9 Crocus Hill, St. Paul, MN 55102	2007
Ronald Gelbman	459 Meadow Lark Drive, Sarasota, FL 34236	2006
Pedro P. Granadillo	519 East Vermont St., Indianapolis, IN 46202	2007
Ronald A. Matricaria	9167 E. Happy Hollow Drive; Scottsdale, AZ 85262	2006
Brad Nutter	Colonnade Residences, Apt. 1104, 118 Huntington Ave., Boston, MA 02116	2006
Benjamin L. Holmes	126 Deer Run, Ketchum, ID 83440	2005
Lawrence C. Best	3 Commonwealth Ave, Boston, MA 02116	2005
Dr. Yutaka Sakurada	GM Ebisu-no-Mori, 1304 23-6,4-chome Ebisu, Shibuya-ku Tokyo 150-0013 Japan	2005



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

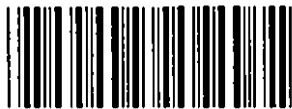
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 96126		2. Name of Corporation HAEMONETICS CORPORATION		
3. Street Address Principal Business Office 400 Wood Rd		City Braintree	State MA	Zip 02184
4. Business Phone No. 781-548-7100		5. State of Incorporation MASSACHUSETTS		6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island SALES AND SERVICE OF BLOOD PROCESSING EQUIPMENT.				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Brad Nutter		Vice President Name Ronald J. Ryan		
Street Address 400 Wood Rd		Street Address 400 Wood Rd		
City Braintree	State MA	Zip 02184	City Braintree	State MA
Secretary Name Alicia R. Lopez		Treasurer Name (same as above)		
Street Address 400 Wood Rd		Street Address		
City Braintree	State MA	Zip 02184	City	State
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Brad Nutter		Director Name Ronald A. Metricaria		
Street Address 118 Huntington Ave, Apt 1104		Street Address 916 E Happy Hollow Dr		
City Boston	State MA	Zip 02118	City Scottsdale	State AZ
Director Name Ronald Gelbman		Director Name Benjamin L. Holmes		
Street Address 185 Black River Rd.		Street Address 126 Deer Run		
City Long Valley	State NJ	Zip 07853	City Ketchum	State ID
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES		ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
80,000,000 COMM \$0.01 PAR VALUE			1,124,849	Common
				.01

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



\* 9 6 1 2 6 \*

File Date 2-11-04  
Check No. 560672  
By: AM

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

Alicia R. Lopez

Print or Type Name of Officer

Vice President General Counsel

Title of Officer

**HAEMONETICS CORPORATION**  
**Listing of Officers and Board of Directors - 2003**

**OFFICERS:**

Brad Nutter	President	118 Huntington Ave., Boston, MA 02116
Alicia R. Lopez	Clerk	87 Chapman Street, Canton, MA 02021
Ronald J. Ryan	CFO	19 Suffolk Road, Sudbury, MA 01775
Susan Hanlon	Controller	20 Currier Lane, Westwood, MA 02090

**BOARD OF DIRECTORS**

		EXPIRATION OF TERM
Ronald Gelbman	185 Black River Rd., Long Valley, NJ 07853	
Ronald A. Matricaria	9167 E. Happy Hollow Drive; Scottsdale, AZ 85262	2006
Brad Nutter	Colonnade Residences, Apt. 1104, 118 Huntington Ave., Boston, MA 02116	2006
Benjamin L. Holmes	126 Deer Run, Ketchum, ID 83440	2006
Lawrence C. Best	3 Commonwealth Ave, Boston, MA 02116	2005
Harvey G. Klein	13628 Canal Vista Court, Potomac, MD 20854	2005
Dr. Yutaka Sakurada	Shin-Kojimachi Bldg., 1F & 2F, 4-3-3, Kojimachi Chiyoda-Ku, Tokyo 102-0083, Japan	2004
Donna C.E. Williamson	345 Birch Street, Winnetka, IL 60063	2004



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

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **96126** 2. Name of Corporation **HAEMONETICS CORPORATION**

3. Street Address Principal Business Office **400 Wood Road** City **Braintree** State **MA** Zip **02184**  
4. Business Phone No. **781-848-7100** 5. State of Incorporation **MASSACHUSETTS** 6. SIC Code **0**

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

**Sales of blood processing equipment**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>James L. Peterson</b>	Vice President Name <b>Ronald J. Ryan</b>
Street Address <b>400 Wood Rd</b>	Street Address <b>400 Wood Rd</b>
City <b>Braintree</b> State <b>MA</b> Zip <b>02184</b>	City <b>Braintree</b> State <b>MA</b> Zip <b>02184</b>
Secretary Name <b>Alicia R. Lopez</b>	Treasurer Name <b>Same as above</b>
Street Address <b>400 Wood Rd</b>	Street Address
City <b>Braintree</b> State <b>MA</b> Zip <b>02184</b>	City State Zip

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>James L. Peterson</b>	Director Name <b>Benjamin L. Holmes</b>
Street Address <b>400 Wood Rd</b>	Street Address <b>126 Dorr Hwy</b>
City <b>Braintree</b> State <b>MA</b> Zip <b>02184</b>	City <b>Kathtum</b> State <b>ID</b> Zip <b>83410</b>
Director Name <b>Ronald Gelbman</b>	Director Name <b>Harvey G. Klein</b>
Street Address <b>155 Black River Road</b>	Street Address <b>1648 Canal Vista Court</b>
City <b>Long Valley</b> State <b>NJ</b> Zip <b>07853</b>	City <b>Potomac</b> State <b>MD</b> Zip <b>20854</b>

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

**80,000,000 COMM \$.01 PAR VALUE**

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES

Number of Shares Class/Series Par Value

**31,453,000 Common**

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



\* 9 6 1 2 6 \*

File Date: **4-2-03**

Check No: **540092**

By: **ICP**

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 **Alicia R. Lopez** Date **1/28/03**

Print or Type Name of Officer **SVP, General Counsel**

Title of Officer **SVP, General Counsel**

**HAEMONETICS CORPORATION****Listing of Officers and Board of Directors - 2002****OFFICERS:**

James L. Peterson	President	2 Commonwealth Ave., Apt. 14C, Boston, MA 02116
Alicia R. Lopez	Clerk	87 Chapman Street, Canton, MA 02021
Ronald J. Ryan	CFO	19 Suffolk Road, Sudbury, MA 01775
Steve Kasok	Treasurer	25 Standish Circle, Wellesley Hills, MA 02481

**BOARD OF DIRECTORS****EXPIRATION OF TERM**

Ronald Gelbman	185 Black River Rd., Long Valley, NJ 07853	2003
Benjamin L. Holmes	126 Deer Run, Ketchum, ID 83440	2002
Harvey G. Klein	13628 Canal Vista Court, Potomac, MD 20854	2004
N. Colin Lind	121 San Carlos Ave., Sausalito, CA 94965	2003
James L. Peterson	400 Wood Road, Braintree, MA 02184	2002
Dr. Yutaka Sakurada	Shin-Kojimachi Bldg., 1F & 2F, 4-3-3, Kojimachi Chiyoda-Ku, Tokyo 102-0083, Japan	2004
Sir Stuart Burgess	The Old Post House, 18 London End, Beaconsfield, England HP9 2JH	2003
Donna C.E. Williamson	345 Birch Street, Winnetka, IL 60063	2004
Ronald A. Matricaria	9167 E. Happy Hollow Drive, Scottsdale, AZ 85262	2005



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 96126 2. Name of Corporation HAEMONETICS CORPORATION  
3. Street Address Principal Business Office 400 400 Wood Road City Braintree State MA Zip 02184  
4. Business Phone No. 781-848-7100 5. State of Incorporation MASSACHUSETTS 6. SIC Code 0

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

manufacturer of medical devices

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name James L. Peterson Vice President Name Ronald J. Ryan  
Street Address 20 Rows Wharf, #409 Street Address 19 Suffolk Road  
City Boston State MA Zip 02110 City Sudbury State MA Zip 01776  
Secretary Name Alicia R. Lopez Treasurer Name same as above  
Street Address 87 Chapman Street Street Address  
City Canton State MA Zip 02021 City State Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name James L. Peterson Director Name Harvey G. Klein  
Street Address 20 Rows Wharf #409 Street Address 13628 Canal Vista Court  
City Boston, State MA Zip 02110 City Potomac State MD Zip 20854  
Director Name Benjamin Holmes Director Name N. Colin Lind  
Street Address 126 Deer Run Street Address 121 San Carlos Ave.  
City Ketchum State ID Zip 83340 City Sausalito State CA Zip 94965

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares 80,000,000 Class/Series COMM Par Value \$.01

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares 31,324,320 Class/Series Common Par Value .01

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



\* 9 6 1 2 6 \*

File Date: 3/13/02

Check No.: 517571

By: AB

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 Alicia R. Lopez Date 1/25/02

Print or Type Name of Officer Clerk, SVP, General Counsel

Title of Officer

**Haemonetics Corporation**  
**Listing of Officers and Board of Directors**

**OFFICERS:**

James L. Peterson	President	20 Rowes Wharf Unit #409, Boston, MA 02110
Alicia R. Lopez	Clerk	87 Chapman Street, Canton, MA 02021
Ronald J. Ryan	CFO, Treasurer	19 Suffolk Road, Sudbury, MA 01776

**BOARD OF DIRECTORS:**

Ronald G. Gelbman	415 Longboat Club Drive, Longboat Key, FL 34225
Benjamin L. Holmes	126 Deer Run, Ketchum, ID 83440
Harvey G. Klein, MD	6 Willow Gate Ct., Bethesda, MD 20817
N. Colin Lind	121 San Carlos Ave, Sausalito, CA 94965
James L. Peterson	400 Wood Road, Braintree, MA 02184
Dr. Yutaka Sakurada	YGT 2-417, 4-20-2, Ebisu, Shibuya-ku, Tokyo 150-0013, Japan
Sir Stuart Burgess	Flint Barn CT, Church St., Amersham, Buckinghamshire, England HP70DB
Donna C.E. Williamson	345 Birch Street, Winnetka, IL 60063





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

Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **96126** 2. Name of Corporation **HAEMONETICS CORPORATION**

3. Street Address Principal Business Office  
**400 Wood Road**

City **Braintree** State **MA** Zip **02184**

4. Business Phone No.

**781-848-7100**

5. State of Incorporation

**MASSACHUSETTS**

6. SIC Code  
**0**

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

**Manufacturer of blood processing equipment**

## 8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

**James L. Peterson**

Vice President Name

**Ronald J. Ryan**

Street Address

**20 Rows Wharf, #409**

Street Address

**19 Suffolk Road**

City **Boston** State **MA** Zip **02110**

City **Sudbury** State **MA** Zip **01776**

Secretary Name

**Alicia R. Lopez**

Treasurer Name

**Same as above**

Street Address

**87 Chapman Street**

Street Address

City **Canton** State **MA** Zip **02021**

City **Sudbury** State **MA** Zip **01776**

## 9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

**James L. Peterson**

Director Name

**Harvey G. Klein**

Street Address

**20 Rows Wharf, #409**

Street Address

**13628 Canal Vista Court**

City **Boston,** State **MA** Zip **02110**

City **Potomac** State **MD** Zip **20854**

Director Name

**Benjamin Holmes**

Director Name

**N. Colin Lind**

Street Address

**126 Deer Run**

Street Address

**121 San Carlos Avenue**

City **Ketchum** State **ID** Zip **83340**

City **Sausalito** State **CA** Zip **94965**

## 10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

**80,000,000 COMM \$.01 PAR**

## 11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares Class/Series Par Value

**30,004,811 Common \$.01**

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



\* 9 6 1 2 6 \*

File Date: 1/26

Check No.: 493860

By: AL

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.

Alicia R. Lopez 1/10/01  
Signature of Officer Date

ALICIA R. LOPEZ  
Print or Type Name of Officer

SR. V.P. Gen. Counsel + Clerk  
Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**

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

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 2. Name of Corporation

3. Street Address 96126 Principal Business Office HAEMONETICS CORPORATION

1100 Wood Rd

4. Business Phone No.

5. State of Incorporation

City

Braintree

State

MA

Zip

02184

6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island 781-848-7100 MASSACHUSETTS

Manufacturer of Blood Processing Equipment

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

James L. Peterson

Street Address

Ronald J. Ryan

Street Address

20 Rowes Wharf, #409

City State Zip

19 Suffolk Road

City State Zip

Boston, MA

02110

Sudbury

MA

01776

Secretary Name

Alicia R. Lopez

Street Address

Treasurer Name

Same as above

Street Address

87 Chapman Street

City State Zip

Canton, MA

02021

City

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

James L. Peterson

Street Address

20 Rowes Wharf #409

City State Zip

Boston, MA

02110

Harvey G. Klein

Street Address

6 Willow Gate Ct.

City State Zip

Bethesda

MD

20817

Director Name

Benjamin Holmes

Street Address

80 Hunters Ridge Road

City State Zip

Concord, MA

01742

Director Name

N. Colin Lind

Street Address

121 San Carlos Ave,

City State Zip

Sausalito

CA

94965

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

80,000,000 COMM \$.01 PAR

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

29,725,122 Common .01

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



\* 9 6 1 2 6 \*

File Date: 2/18/00

Check No.: 474037

By: [Signature]

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

Alicia R. Lopez

Print or Type Name of Officer

Title of Officer

SR VP & General Counsel

**Haemonetics Corporation**  
**Listing of Officers and Board of Directors**

**OFFICERS:**

James L. Peterson	President	20 Rowes Wharf Unit #409, Boston, MA 02110
Alicia R. Lopez	Clerk	87 Chapman Street, Canton, MA 02021
Ronald J. Ryan	CFO, Treasurer	19 Suffolk Road, Sudbury, MA 01776

**BOARD OF DIRECTORS:**

Ronald G. Gelbman	415 Longboat Club Drive, Longboat Key, FL 34225
Benjamin L. Holmes	80 Hunters Ridge Road, Concord, MA 01742
Harvey G. Klein, MD	6 Willow Gate Ct., Bethesda, MD 20817
N. Colin Lind	121 San Carlos Ave, Sausalito, CA 94965
James L. Peterson	400 Wood Road, Braintree, MA 02184
Dr. Yutaka Sakurada	YGT 2-417, 4-20-2, Ebisu, Shibuya-ku, Tokyo 150-0013, Japan
Sir Stuart Burgess	Flint Barn CT, Church St., Amersham, Buckinghamshire, England HP70DB
Donna C.E. Williamson	345 Birch Street, Winnetka, IL 60063

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

96126

2. Name of Corporation

HAEMONETICS CORPORATION

3. Street Address Principal Business Office

400 Wood Rd

City

Braintree

State

MA

Zip

02184

4. Business Phone No.

781-848-7100

5. State of Incorporation

MASSACHUSETTS

6. SIC Code

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

Manufacturer of blood processing equipment

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) ☒ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

James L. Peterson

Street Address

20 Bowes Wharf #409

City

Boston

State

MA

Zip

02110

Secretary Name

Alicia R. Lopez

Street Address

87 Chapman St

City

Canton

State

MA

Zip

02021

Vice President Name

Ronald J. Ryan

Street Address

19 Suffolk Rd

City

Sudbury

State

MA

Zip

01776

Treasurer Name

Street Address

City

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) ☒ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

James L. Peterson

Street Address

20 Bowes Wharf #409

City

Boston

State

MA

Zip

02110

Director Name

Benjamin L. Holmes

Street Address

80 Hunters Ridge Rd.

City

Concord

State

MA

Zip

01742

Director Name

Harvey G. Klein

Street Address

6 Willow Gate Ct.

City

Bethesda

State

MD

Zip

20817

Director Name

Jerry Robertson

Street Address

43 Seawatch Lake Dr.

City

Boca Grande

State

FL

Zip

33921

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

80,000,000 COMM \$.01 PAR

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

29,698,011

~~20,944,242~~

Common

.01

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



\* 9 6 1 2 6 \*

File Date:

11/26/99

Check No.:

452877

By:

JD

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

Alicia R. Lopez

Print or Type Name of Officer

Corporate Vice President, Secretary

Title of Officer

Date

11/21/99



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. 96126 2. Name of Corporation Haemonetics Corporation  
3. Street Address Principal Business Office 400 Wood Road City Braintree State MA Zip 02184  
4. Business Phone No. 781-848-7100 5. State of Incorporation Massachusetts  
6. SIC Code

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

Sale of Blood Processing Equipment

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

President Name Vice President Name

Street Address City State Zip

Secretary Name Treasurer Name

Street Address City State Zip

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

Director Name Director Name

Street Address City State Zip

Director Name Director Name

Street Address City State Zip

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

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
80,000,000	Common	.01	26,584,679	Common	.01

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

File Date: 7/2/98

Check No.: 435089

By: GAP

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

Alicia R. Lopez

Secretary

**Haemonetics Corporation**  
**Listing of Officers and Board of Directors**

**OFFICERS:**

James L. Peterson	President	20 Rows Wharf Unit #409, Boston, MA 02110
Alicia R. Lopez	Clerk	87 Chapman Street, Canton, MA 02021
Ronald J. Ryan	CFO, Treasurer	19 Suffolk Road, Sudbury, MA 01776

**BOARD OF DIRECTORS:**

Benjamin L. Holmes	80 Hunters Ridge Road, Concord, MA 01742 Term exp: 1999
Jerry E. Robertson	43 Seawatch Lake Drive, Boca Grande, FL 33921 Term exp: 2000
James L. Peterson	400 Wood Road, Braintree, MA 02184 Term exp: 1999
Dr. Yutaka Sakurada	YGT 2-417, 4-20-2, Ebisu, Shibuya-ku, Tokyo 150-0013, Japan Term exp: 1998
Sir Stuart Burgess	Flint Barn CT, Church St., Amersham, Buckinghamshire, England HP70DB Term exp: 2000
Donna C.E. Williamson	345 Birch Street, Winnetka, IL 60063 Term exp: 1998

JB 9/6/24