



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:** 2020

**1. Corporate ID No.** 000088961

**2. Name of Corporation** Patterson Dental Supply, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 1031 MENDOTA HEIGHTS ROAD  
City or Town: ST PAUL

State: MN Zip: 55120 Country: USA

**4. Business Phone No.**

**5. State of Incorporation**

State: MN

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

423490

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

PATTERSON'S DENTAL SEGMENT PROVIDES A VIRTUALLY COMPLETE RANGE OF CONSUMABLE DENTAL PRODUCTS, EQUIPMENT AND SOFTWARE, TURNKEY DIGITAL SOLUTIONS AND VALUE-ADDED SERVICES TO DENTISTS AND DENTAL LABORATORIES THROUGHOUT NORTH AMERICA.

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

**All officers and directors must be listed.**

Title	Individual Name	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID G. MISIAK	1031 MENDOTA HEIGHTS ROAD ST PAUL, MN 55120 USA
SECRETARY	LES B KORSH	1031 MENDOTA HEIGHTS ROAD ST PAUL, MN 55120 USA
TREASURER/CFO	ANN B. GUGINO	1031 MENDOTA HEIGHTS ROAD ST PAUL, MN 55120 USA
DIRECTOR	ANN B. GUGINO	1031 MENDOTA HEIGHTS ROAD ST PAUL, MN 55120 USA
DIRECTOR	JAMES WILTZ	1031 MENDOTA HEIGHTS ROAD ST PAUL, MN 55120 USA

### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$0.0100	100,000.00	1000

**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 1 Day of February, 2020 at 12:55:25 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 ADAM STEIMEL  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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