

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 824176

**Entity Name:** BECTON DICKINSON AND COMPANY

**Current Principal Place of Business:**

1 BECTON DRIVE  
FRANKLIN LAKES, NJ 07417

**Current Mailing Address:**

1 BECTON DRIVE  
FRANKLIN LAKES, NJ 07417 US

**FEI Number:** 22-0760120

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT/DIRECTOR  
Name            FORLENZA, VINCENT A.  
Address        1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title            TREASURER  
Name            GALLAGHER, JOHN E.  
Address        1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title            SECRETARY  
Name            DEFAZIO, GARY M.  
Address        1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title            DIRECTOR  
Name            ANDERSON, BASIL L.  
Address        1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title            DIRECTOR  
Name            BURZIK, CATHERINE M.  
Address        1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title            DIRECTOR  
Name            ECKERT, ROBERT ANDREW  
Address        1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title            DIRECTOR  
Name            FRASER, CLAIRE M.  
Address        1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title            DIRECTOR  
Name            JONES, CHRISTOPHER  
Address        1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GARY M. DEFAZIO

**SECRETARY**

**04/20/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name LARSEN, MARSHALL O.  
Address 1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title DIRECTOR  
Name ORR, JAMES F.  
Address 1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title DIRECTOR  
Name POMEROY, CLAIRE  
Address 1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title DIRECTOR  
Name SCOTT, BERTRAM L.  
Address 1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title DIRECTOR  
Name MECKLENBURG, GARY A.  
Address 1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title DIRECTOR  
Name OVERLOCK, JR., WILLARD J.  
Address 1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417

Title DIRECTOR  
Name RIMEL, REBECCA W.  
Address 1 BECTON DRIVE  
City-State-Zip: FRANKLIN LAKES NJ 07417