

2020 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 DIRECTOR
Name RIMEL, REBECCA W.
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 LARSEN, MARSHALL O.
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

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

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

Title DIRECTOR
Name POLEN, THOMAS E.
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

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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 DEFAZIO

CORPORATE SECRETAR 05/02/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

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

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

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

Title CFO
Name REIDY, CHRISTOPHER R.
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 CORPORATE SECRETARY
Name DEFAZIO, GARY
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 DIRECTOR
Name MELCHER, DAVID F.
Address 1 BECTON DRIVE
City-State-Zip: FRANKLIN LAKES NJ 07417

Title PRESIDENT AND CHIEF EXECUTIVE
OFFICER
Name POLEN, THOMAS E.
Address 1 BECTON DRIVE
City-State-Zip: FRANKLIN LAKES NJ 07417