

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000004113

**Entity Name:** BARD PERIPHERAL VASCULAR, INC.

**Current Principal Place of Business:**

1415 WEST THIRD STREET, SUITE 109  
TEMPE, AZ 85281

**FILED**  
**May 02, 2020**  
**Secretary of State**  
**7772803428CC**

**Current Mailing Address:**

1415 WEST THIRD STREET, SUITE 109  
TEMPE, AZ 85281 US

**FEI Number: 86-0290297**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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 BEDNO, REBECCA  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title PRESIDENT  
Name CAMPION, SIMON  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title VP  
Name CUETO, HERMAN VICTOR  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title VICE PRESIDENT/SECRETARY  
Name DEFAZIO, GARY  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title VICE PRESIDENT & TREASURER  
Name GALLAGHER, JOHN  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title DIRECTOR  
Name LASALA, JOSEPH  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title VP  
Name RITTMAN, SCOTT J.  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title VP  
Name SEGRETO, ANTOINETTE  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

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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**

**VICE  
PRESIDENT/SECRETARY**

**05/02/2020**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name SPOEREL, THOMAS  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title DIRECTOR  
Name DEFAZIO, GARY  
Address 1415 WEST THIRD STREET, SUITE 109  
City-State-Zip: TEMPE AZ 85281

Title VP  
Name WILLIAMSON, STEVEN S.  
Address 1415 WEST THIRD STREET, SUITE  
109  
City-State-Zip: TEMPE AZ 85281