

1.) CORPORATION NAME:

**MYLAN TECHNOLOGIES, INC.**

DUE DATE: **11/30/2010**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
11 S 12TH ST  
PO BOX 1463**

SCC ID NO: **F1234147**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

**RICHMOND, VA 23218**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**WV**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 110 LAKE ST.

CITY/ST/ZIP: STL. ALBANS, VT 05478-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KRISTIN A KOLESAR	
TITLE:	SECRETARY	
ADDRESS:	1500 CORP DR	
CITY/ST/ZIP/CO:	CANONSBURG, PA 15317-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOSEPH F HAGGERTY	
TITLE:	DIRECTOR	
ADDRESS:	1500 CORPORATE DRIVE STE 400	
CITY/ST/ZIP/CO:	CANONSBURG, PA 15317-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CAROLYN J MYERS	
TITLE:	DIRECTOR	
ADDRESS:	1500 CORP DR STE 400	
CITY/ST/ZIP/CO:	CANONSBURG, PA 15317-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BRIAN BYALA	
TITLE:	TREASURER	
ADDRESS:	1500 CORP DR	
CITY/ST/ZIP/CO:	CANONSBURG, PA 15317-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	HARRY KORMAN	
TITLE:	PRESIDENT	
ADDRESS:	781 CHESTNUT RIDGE ROAD	
CITY/ST/ZIP/CO:	MORGANTOWN, WV 26505-	

NAME: WILLIAM BROCHU TITLE: VICE PRESIDENT ADDRESS: 110 LAKE STREET CITY/ST/ZIP/CO: ST. ALBANS, VT 05478-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: JOHN HANGO TITLE: VICE PRESIDENT ADDRESS: 110 LAKE STREET CITY/ST/ZIP/CO: ST. ALBANS, VT 05478-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: MICHAEL HOUGHTON TITLE: VICE PRESIDENT ADDRESS: 781 CHESTNUT RIDGE ROAD CITY/ST/ZIP/CO: MORGANTOWN, WV 26505-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: DAVID L. KENNEDY TITLE: VICE PRESIDENT ADDRESS: 1500 CORP DR STE 400 CITY/ST/ZIP/CO: CANONSBURG, PA 15317-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
<u>/s/ DAVID L. KENNEDY</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>DAVID L. KENNEDY, VICE PRESIDENT</u> PRINTED NAME AND CORPORATE TITLE	<u>11/8/2010</u> DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		