

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005498

FILED
Feb 15, 2011
Secretary of State

Entity Name: EMERGENT BIOSOLUTIONS INC.

Current Principal Place of Business:

2273 RESEARCH BLVD STE 400
ROCKVILLE, MD 20850

New Principal Place of Business:

Current Mailing Address:

2273 RESEARCH BLVD STE 400
ROCKVILLE, MD 20850

New Mailing Address:

FEI Number: 14-1902018 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: C
Name: EL-HIBRI, FUAD
Address: 2273 RESEARCH BLVD STE 400
City-St-Zip: ROCKVILLE, MD 20850

Title: D
Name: SULLIVAN, LOUISE DR
Address: 2273 RESEARCH BLVD STE 400
City-St-Zip: ROCKVILLE, MD 20850

Title: D
Name: HARSANYI, ZSOLTE DR
Address: 2273 RESEARCH BLVD STE 400
City-St-Zip: ROCKVILLE, MD 20850

Title: PCOO
Name: ABDUN-NABI, DANIEL J
Address: 2273 RESEARCH BLVD STE 400
City-St-Zip: ROCKVILLE, MD 20850

Title: S
Name: REILLY, JAY G
Address: 2273 RESEARCH BLVD STE 400
City-St-Zip: ROCKVILLE, MD 20850

Title: TCFO
Name: ELSEY, R. DON
Address: 2273 RESEARCH BLVD STE 400
City-St-Zip: ROCKVILLE, MD 20850

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: R. DON ELSEY

CFO

02/15/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date