

F14000000350 (15) Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000020601 3)))



H140000206013ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
ANACOR PHARMACEUTICALS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

RECEIVED
14 JAN 27 PM 7:13
REGISTRATION DIVISION
TALLahassee, FL 32309

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 27 AM 11:46

Electronic Filing Menu Corporate Filing Menu Help

Handwritten signature and date: 1/28/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Anacor Pharmaceuticals, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Lucy O. Day, VP Finance

Name of Person	
<u>Anacor Pharmaceuticals, Inc.</u>	
Firm/Company	
<u>1020 E. Meadow Circle</u>	
Address	
<u>Palo Alto, CA 94303</u>	
City/State and Zip code	
<u>lday@anacor.com; jmarconi@anacor.com</u>	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

<u>Lucy O. Day</u>	at (<u>650</u>) <u>543-7502</u>
Name of Person	Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

FILED
STATE ARCHIVE OF STATE
DIVISION OF CORPORATIONS
14 JAN 27 AM 11:46

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Anacor Pharmaceuticals, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

N/A

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 25-1854385
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/14/2000 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. July 29, 2014
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1020 E. Meadow Circle, Palo Alto, CA 94303
(Principal office address)
Same
(Current mailing address)

8. Sale and distribution of prescription pharmaceuticals.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

CT Corporation System

By: Renee Cruz Renee Cruz, Asst. Secretary
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
STATE
CORPORATIONS
14 JAN 27 AM 11:46

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

14 JAN 27 AM 11:47

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Paul L. Berns
Address: 9906 Fallen Leaf Drive
Middleton, WI 53562

Vice Chairman: _____
Address: _____

Director: Anders Hove, M.D.
Address: 530 Fifth Avenue, 22nd Floor
New York, NY 10036

Director: Paul Klingenstein
Address: One Embarcadero Center, Suite 4000
San Francisco, CA 94111

B. OFFICERS

President: David Perry
Address: 1020 E. Meadow Circle
Palo Alto, CA 94303

Vice President: Geoffrey M. Parker
Address: 1020 E. Meadow Circle
Palo Alto, CA 94303

Secretary: Glen Sato
Address: 3175 Hanover Street, Palo Alto, CA 94304

Treasurer: Geoffrey M. Parker
Address: 1020 E. Meadow Circle, Palo Alto, CA 94303

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Geoffrey M. Parker, SVP and Chief Financial Officer
(Typed or printed name and capacity of person signing application)

Florida – Application to transact business

Attachment with additional information for Anacor Pharmaceuticals, Inc.

12(A). Board of Directors, continued:

**Mark Leschly
525 University Avenue, Suite 1530
Palo Alto, CA 94301**

**William Rieflin
630 Gateway Blvd
South San Francisco, CA 94080**

**Lucy Shapiro, Ph.D.
279 Campus Drive
Stanford, CA 94305**

**David Perry
1020 E. Meadow Circle
Palo Alto, CA 94303**

12(B). Officers, continued:

**Sanjay Chanda, Ph.D.
SVP Drug Development
1020 E. Meadow Circle
Palo Alto, CA 94303**

**Kirk Maples, Ph.D.
SVP Program Management
1020 E. Meadow Circle
Palo Alto, CA 94303**

**Jake Plattner, Ph.D.
SVP Research
1020 E. Meadow Circle
Palo Alto, CA 94303**

**Lee Zane, M.D.
SVP and Chief Medical Officer
1020 E. Meadow Circle
Palo Alto, CA 94303**

FILED
STATE DEPT OF STATE
DIVISION OF CORPORATIONS
14 JAN 27 AM 11:47

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANACOR PHARMACEUTICALS, INC." IS DOLY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JANUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.


FILED
SECRETARY OF STATE
REGISTERED CORPORATIONS
14 JAN 27 AM 11:47

3325077 8300

140090461

You may verify this certificate online at corp.delaware.gov/authvar.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: .1084305

DATE: 01-24-14