

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2002 8:00 am
Secretary of State

02-12-2002 90105 020 ***150.00

DOCUMENT # F99000001454

1. Entity Name
CELLTECH PHARMACEUTICALS, INC.

Principal Place of Business

**755 JEFFERSON ROAD
 ROCHESTER NY 14623**

Mailing Address

**755 JEFFERSON ROAD
 ROCHESTER NY 14623**

2. Principal Place of Business
SAME

3. Mailing Address
SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

75-1984155

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

Name

N/A

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

N/A

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.**
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

**10. Election Campaign Financing
 Trust Fund Contribution.** ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO WATTS, GARRY REGENT PARK KINGSTON ROAD LEATHERHEAD, SURREY, UK KT22- 7PQ	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PARKER, THOMAS C 755 JEFFERSON ROAD ROCHESTER NY	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILEY, HELEN P 755 JEFFERSON ROAD ROCHESTER NY	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COOT GARLAND, IAN R 755 JEFFERSON ROAD ROCHESTER NY	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCT THORP, KEITH R 755 JEFFERSON STREET ROCHESTER NY	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HARDY, MARK G REGENT PARK KINGSTON ROAD LEATHERHEAD, SURREY, UK KT22- 7PQ	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/PRESIDENT SIMON CARMELL 216 BATH ROAD SLOUGH, BERKS SL1 4EN UK	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/SR. VP STUART ARBUCKLE 755 JEFFERSON ROAD ROCHESTER, NY 14623	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY GAIL M. NORRIS 755 JEFFERSON RD. ROCHESTER, NY 14623	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/2002 716-475-9000

Date

Daytime Phone #

CR2E034 (9/01)