2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003340

Entity Name: SUNOVION PHARMACCUTICALS INC.

Current Principal Place of Business:

84 WATERFORD DRIVE
MARLBOROUGH, MA 01752

Current Mailing Address:

84 WATERFORD DRIVE
MARLBOROUGH, MA 01752 US

FEI Number: 22-2536587

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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:

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Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR		Title	CFO
Name	TAMURA, NOBUHIKO		Name	FREEMAN, STEVEN
Address	84 WATERFORD DRIVE		Address	84 WATERFORD DRIVE
City-State-Zip:	MARLBOROUGH MA 01752		City-State-Zip:	MARLBOROUGH MA 01752
Title	ASST. SECRETARY		Title	DIRECTOR
Name	SCHMIDT, MELISSA A.		Name	BABA, HIROYUKI
Address	84 WATERFORD DRIVE		Address	84 WATERFORD DRIVE
City-State-Zip:	MARLBOROUGH MA 01752		City-State-Zip:	MARLBOROUGH MA 01752
Title	DIRECTOR		Title	DIRECTOR
Name	LOEBEL, ANTONY		Name	NOMURA, HIROSHI
Address	84 WATERFORD DRIVE		Address	84 WATERFORD DRIVE
City-State-Zip:	MARLBOROUGH MA 01752		City-State-Zip:	MARLBOROUGH MA 01752
Title	DIRECTOR			
Name	TADA, MASSAYO			
Address	84 WATERFORD DRIVE			
City-State-Zip:	MARLBOROUGH MA 01752			

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: MELISSA A. SCHMIDT   ASSISTANT SECRETARY   04/18/2015

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Electronic Signature of Signing Officer/Director Detail   Date