

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006112

Entity Name: CTI BIOPHARMA CORP.**Current Principal Place of Business:**3101 WESTERN AVE
SUITE 600
SEATTLE, WA 98121**Current Mailing Address:**3101 WESTERN AVE
SUITE 600
SEATTLE, WA 98121 US**FEI Number:** 91-1533912**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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name BIANCO, JAMES AMD
Address 3101 WESTERN AVE
SUITE 600
City-State-Zip: SEATTLE WA 98121

Title VD
Name SINGER, JACK
Address 3101 WESTERN AVE
SUITE 600
City-State-Zip: SEATTLE WA 98121

Title SECRETARY
Name BIANCO, LOUIS
Address 3101 WESTERN AVE
SUITE 600
City-State-Zip: SEATTLE WA 98121

Title D
Name TELLING, FRED
Address 3101 WESTERN AVE
SUITE 600
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name MUNDINGER, MARY O
Address 3101 WESTERN AVE
SUITE 600
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name NUDELMAN, PHILIP M PHD
Address 3101 WESTERN AVE
SUITE 600
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name LOVE, RICHARD
Address 3101 WESTERN AVE
SUITE 600
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name TUCKSON, REED DR.
Address 3101 WESTERN AVE
SUITE 600
City-State-Zip: SEATTLE WA 98121

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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: LOUIS A BIANCO**SECRETARY****03/24/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MATTHEW, PERRY D
Address	3101 WESTERN AVE SUITE 600
City-State-Zip:	SEATTLE WA 98121