

2021 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000006112

Entity Name: CTI BIOPHARMA CORP.**Current Principal Place of Business:**3101 WESTERN AVE
SUITE 800
SEATTLE, WA 98121**Current Mailing Address:**3101 WESTERN AVE
SUITE 800
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:** DONNA MOCH

08/02/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CRAIG, ADAM R
Address 3101 WESTERN AVE
 SUITE 800
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name MATTHEW , PERRY
Address 3101 WESTERN AVE
 SUITE 800
City-State-Zip: SEATTLE WA 98121

Title TREASURER
Name KIRSKE, DAVID
Address 3101 WESTERN AVE
 SUITE 800
City-State-Zip: SEATTLE WA 98121

Title SECRETARY
Name SEELEY, BRUCE
Address 3101 WESTERN AVE SUITE 800
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name ADAM R , CRAIG
Address 3101 WESTERN AVE SUITE 800
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name REED V , TUCKSON
Address 3101 WESTERN AVE SUITE 800
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name RICHARD , LOVE
Address 3101 WESTERN AVE
 SUITE 800
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name FRED , TELLING
Address 3101 WESTERN AVE
 SUITE 800
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: LOUISE POBANZVP FINANCE AND
ACCOUNTING

08/02/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LAURENT , FISCHER
Address 3101 WESTERN AVE
SUITE 800
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name DAVID , PARKINSON
Address 3101 WESTERN AVE
SUITE 800
City-State-Zip: SEATTLE WA 98121

Title DIRECTOR
Name MICHAEL A , METZGER
Address 3101 WESTERN AVE
SUITE 800
City-State-Zip: SEATTLE WA 98121

Title VP FINANCE AND ACCOUNTING
Name LOUISE , POBANZ
Address 3101 WESTERN AVE
SUITE 800
City-State-Zip: SEATTLE WA 98121