

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005354

Entity Name: BIOGEN IDEC U.S. CORPORATION**Current Principal Place of Business:**14 CAMBRIDGE CENTER
CAMBRIDGE, MA 02142**Current Mailing Address:**14 CAMBRIDGE CENTER
CAMBRIDGE, MA 02142**FEI Number:** 04-3580942**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 PRESIDENT, DIRECTOR
Name CLANCY, PAUL
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title VP
Name GABEL, WENDY
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title TREASURER, VP, DIRECTOR
Name DAMBACH, MICHAEL
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title DIRECTOR
Name SULLIVAN, LYNNE
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title SECRETARY, VP
Name LICHT, ROBERT A
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title AS
Name WALKER, ROBIN A
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title AS
Name TAORMINA , JO ANN
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title AS
Name BASTA, JAMES
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

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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: ROBERT A. LICHT**SECRETARY****04/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title AT
Name BARRY, PAMELA
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title EVP
Name COX, JOHN
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title CEO
Name SCANGOS , GEORGE
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142

Title EVP
Name KINGLSLEY, STUART
Address 14 CAMBRIDGE CENTER
City-State-Zip: CAMBRIDGE MA 02142