

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000002598

**Entity Name:** ALLOS THERAPEUTICS, INC.

**Current Principal Place of Business:**

11080 CIRCLEPOINT RD SUITE 430  
WESTMINSTER, CO 80020

**Current Mailing Address:**

157 TECHNOLOGY DRIVE  
ATTN: LEGAL DEPARTMENT  
IRVINE, CA 92618 US

**FEI Number:** 54-1655029

**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            PRESIDENT, SECRETARY, DIRECTOR  
Name            OLER, ABRAHAM N.  
Address        11080 CIRCLEPOINT RD SUITE 430  
City-State-Zip: WESTMINSTER CO 80020

Title            EXECUTIVE VICE PRESIDENT, CFO &  
                    TREASURER  
Name            GUSTAFSON, KURT A.  
Address        11080 CIRCLEPOINT RD SUITE 430  
City-State-Zip: WESTMINSTER CO 80020

Title            DIRECTOR  
Name            SHROTRIYA, RAJESH C.  
Address        11080 CIRCLEPOINT RD SUITE 430  
City-State-Zip: WESTMINSTER CO 80020

Title            DIRECTOR  
Name            LENZA, LUIGI  
Address        11080 CIRCLEPOINT RD SUITE 430  
City-State-Zip: WESTMINSTER CO 80020

Title            DIRECTOR  
Name            SHIELDS, JAMES  
Address        11080 CIRCLEPOINT RD SUITE 430  
City-State-Zip: WESTMINSTER CO 80020

Title            SENIOR VICE PRESIDENT  
Name            SCOTT, BRETT L  
Address        11080 CIRCLEPOINT RD SUITE 430  
City-State-Zip: WESTMINSTER CO 80020

Title            EXECUTIVE VICE PRESIDENT  
Name            KELLER, KEN  
Address        11080 CIRCLEPOINT RD SUITE 430  
City-State-Zip: WESTMINSTER CO 80020

*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:** BRETT L. SCOTT

**SENIOR VICE PRESIDENT 03/18/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date