

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004287

Entity Name: VERINATA HEALTH, INC.**Current Principal Place of Business:**800 SAGINAW DRIVE
REDWOOD CITY, CA 94063**Current Mailing Address:**5200 ILLUMINA WAY
ATTN: TAX DEPT.
SAN DIEGO, CA 92122 US**FEI Number:** 01-0577067**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 CHAIRMAN, PRESIDENT
Name FLATLEY, JAY
Address 5200 ILLUMINA WAY
City-State-Zip: SAN DIEGO CA 92122

Title CFO
Name STAPLEY, MARC
Address 5200 ILLUMINA WAY
City-State-Zip: SAN DIEGO CA 92122

Title VP
Name RAVA, RICHARD
Address 5200 ILLUMINA WAY
City-State-Zip: SAN DIEGO CA 92122

Title SECRETARY
Name DADSWELL, CHARLES E
Address 5200 ILLUMINA WAY
City-State-Zip: SAN DIEGO CA 92122

Title VP
Name BOUCHARD, MIKE
Address 5200 ILLUMINA WAY
City-State-Zip: SAN DIEGO CA 92122

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: MIKE BOUCHARD

VP FINANCE

04/23/2015

Electronic Signature of Signing Officer/Director Detail_____
Date