

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000001212

Entity Name: AFFYMETRIX, INC.**Current Principal Place of Business:**3420 CENTRAL EXPRESSWAY
SANTA CLARA, CA 95051**Current Mailing Address:**3420 CENTRAL EXPRESSWAY
SANTA CLARA, CA 95051**FEI Number:** 77-0319159**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 DIRECTOR
Name TRICE PH.D., ROBERT H
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

Title DIRECTOR
Name GUTHART PH.D., GARY S
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

Title DIRECTOR
Name NACHTSHEIM, JAMI DOVER
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

Title DIRECTOR
Name CHAN, NELSON C
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

Title EVP, COO
Name LAST PH.D, ANDREW J
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

Title EVP
Name WEBER, DAVID
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

Title EVP, CFO
Name WOOD, GAVIN
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

Title PRESIDENT, CEO, DIRECTOR
Name WITNEY PH.D, FRANK
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

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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: SIANG CHIN**SECRETARY****04/10/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name CHIN, SIANG
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051

Title DIRECTOR
Name RAINES, MERILEE
Address 3420 CENTRAL EXPRESSWAY
City-State-Zip: SANTA CLARA CA 95051