2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000001087

Entity Name: ALIMERA SCIENCES, INC.

Current Principal Place of Business:

6120 WINDWARD PARKWAY, STE 290

ALPHARETTA, GA 30005

Current Mailing Address:

6120 WINDWARD PARKWAY, STE 290 ALPHARETTA. GA 30005 US

FEI Number: 20-0028718 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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 CEO Title PCFO

Name MYERS, C DANIEL Name EISWORTH, RICHARD S.

Address 6120 WINDWARD PARKWAY, STE 290 Address 6120 WINDWARD PARKWAY, STE 290

City-State-Zip: ALPHARETTA GA 30005 City-State-Zip: ALPHARETTA GA 30005

Title SVP Title CHIEF SCIENTIFIC OFFICER

Name HOLLAND, DAVE Name GREEN, KEN

Address 6120 WINDWARD PARKWAY, STE 290 Address 6120 WINDWARD PARKWAY, STE 290

City-State-Zip: ALPHARETTA GA 30005 City-State-Zip: ALPHARETTA GA 30005

Title D Title D

Name BROOKS, MARK Name BRADLEY, GLEN

Address 950 TOWER LANE SUITE 700 ITY, CA Address 2505 ANTHEM VILLAGE DRIVE SUITE

94004 E528

City-State-Zip: FOSTER CITY CA 94004 City-State-Zip: HENDERSON NV 89052

Title D Title D

Name PIZZO, PETER Name ROBERTS, CAL

Address 6120 WINDWARD PARKWAY, STE 290 Address 50 CROSSHILL ROAD

City-State-Zip: HARTSDALE NY 10530

City-State-Zip: ALPHARETTA GA 30005

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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: MYERS C DANIEL CEO 06/26/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jun 26, 2018

Secretary of State

CC3676768247

Officer/Director Detail Continued:

Title D Title D

Name LARGENT, JAMES Name LARGENT, JAMES

Address 249 W. PEACHTREE STREET Address 10190 OVBERHILL DRIVE City-State-Zip: NORCROSS GA 30071 City-State-Zip: SANTA ANNA CA 92705

Title D Title

Name HALAK, BRIAN Name KONG, GARHENG

Address ONE PALMER SQUARE SUITE 515 Address 1301 SHOREWAY ROAD SUITE 350

City-State-Zip: PRINCETON NJ 08542 City-State-Zip: BELMONT CA 94002