## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004013

Entity Name: ADC THERAPEUTICS AMERICA, INC.

**Current Principal Place of Business:** 

7001 MALLORCA

BOCA RATON, FL 33433

**Current Mailing Address:** 

430 MOUNTAIN AVENUE 4TH FLOOR, SUITE 402 MURRAY HILL. NJ 07974 US

FEI Number: 47-3367212 Certificate of Status Desired: Yes

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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Feb 06, 2018

Secretary of State

CC8252837481

Officer/Director Detail:

CHAIRMAN OF THE BOARD Title Title SENIOR VICE PRESIDENT

CORR, PETER BARTLEY Name FEINGOLD, JAY Name

Address 6501 REDHOOK PLAZA Address 430 MOUNTAIN AVENUE SUITE 201 4TH FLOOR, SUITE 402

MURRAY HILL NJ 07974 ST. THOMAS 00802 City-State-Zip:

Title **SECRETARY** Title **TREASURER** 

Name GONCALVES, DULCE Name HENCHOZ. STEPHANE

Address ROUTE DE LA CORNICHE 3B Address **ROUTE DE LA CORNICHE 3B** City-State-Zip: **EPALINGES SWITZERLAND** City-State-Zip: **EPALINGES SWITZERLAND** 

Title **DIRECTOR** Title DIRECTOR

Name MARTIN. CHRISTOPHER JOHN Name **EVANS-FREKE, STEPHEN** Address **ROUTE DE LA CORNICHE 3B** 6501 REDHOOK PLAZA Address

> SUITE 201 City-State-Zip: EPALINGES 1066

City-State-Zip: ST. THOMAS 00802

ASSISTANT SECRETARY Title Title VΡ

Name VINCZE, ANDREA Name MULKERRIN, MICHAEL

ROUTE DE LA CORNICHE 3B Address 165 BELLA VISTA DRIVE

Address City-State-Zip: EPALINGES 1066 City-State-Zip: HILLSBOROUGH CA 94010

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

02/06/2018 SIGNATURE: DULCE GONCALVES SECRETARY

Electronic Signature of Signing Officer/Director Detail

above, or on an attachment with all other like empowered.

Date