#### 2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004022

Entity Name: AMAG PHARMACEUTICALS, INC.

**Current Principal Place of Business:** 

1100 WINTER ST. **SUITE 3000** 

WALTHAM, MA 02451

## **Current Mailing Address:**

1100 WINTER ST. **SUITE 3000** 

WALTHAM, MA 02451 US

FEI Number: NOT APPLICABLE 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:

Address

Electronic Signature of Registered Agent

Date

**FILED** May 23, 2020

Secretary of State

4225786874CC

Officer/Director Detail:

Title **DIRECTOR** O'BRIEN, KATHRINE Name

1100 WINTER ST.

SUITE 3000

WALTHAM MA 02451

City-State-Zip:

Title **DIRECTOR** 

JOHNSON, DAVID Name 1100 WINTER ST. Address

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title CHIEF HUMAN RESOURCES

Name SCHICK, KELLY 1100 WINTER ST. Address

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title PRESIDENT/CEO

Name HEIDEN, WILLIAM

1100 WINTER ST. Address

**SUITE 3000** 

WALTHAM MA 02451 City-State-Zip:

Title DIRECTOR

Address

Address

Address

PHILLIPS, ANNE Name

1100 WINTER ST.

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title DIRECTOR

FONTEYNE, PAUL Name

> 1100 WINTER ST. **SUITE 3000**

City-State-Zip: WALTHAM MA 02451

Title COO

MYLES, EDWARD Name

1100 WINTER ST.

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title CFO, IR, IT & PROCUREMENT, EVP

Name MYLES, EDWARD

1100 WINTER ST. Address

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

# Continues on page 2

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: JOSEPH VITTIGLIO

CHIEF BUSINESS OFFICER & CORPORATE **SECRETARY** 

05/23/2020

Electronic Signature of Signing Officer/Director Detail

Date

#### Officer/Director Detail Continued:

Title **EXECUTIVE VICE PRESIDENT** 

Name MYLES, EDWARD Address 1100 WINTER ST.

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title CHIEF BUSINESS OFFICER & CORPORATE

**SECRETARY** 

Name VITTIGLIO, JOSEPH 1100 WINTER ST. Address

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title CHAIRMAN OF THE BOARD

Name SANTINI, GINO 1100 WINTER ST. Address

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title DIRECTOR

Name PEREZ, ROBERT 1100 WINTER ST. Address **SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title DIRECTOR FALLON, JOHN Name Address 1100 WINTER ST.

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

EXECUTIVE VICE PRESIDENT Title

Name KROP, M.D., JULIE Address 1100 WINTER ST. **SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title DIRECTOR Name HEIDEN, BILL 1100 WINTER ST. Address

**SUITE 3000** 

WALTHAM MA 02451 City-State-Zip:

Title **GENERAL COUNSEL** Name VITTIGLIO, JOSEPH Address 1100 WINTER ST.

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title **EXECUTIVE VICE PRESIDENT** 

Name VITTIGLIO, JOSEPH Address 1100 WINTER ST. **SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title DIRECTOR Name SCOON, DAVEY 1100 WINTER ST. Address **SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title **DIRECTOR** 

Name DEPTULA, BARBARA Address 1100 WINTER ST. **SUITE 3000** 

City-State-Zip: WALTHAM MA 02451

Title CHIEF MEDICAL OFFICER

Name KROP, M.D., JULIE Address 1100 WINTER ST. **SUITE 3000** 

WALTHAM MA 02451 City-State-Zip:

Title **DIRECTOR** Name SULAT, JIM

Address 1100 WINTER ST.

**SUITE 3000** 

City-State-Zip: WALTHAM MA 02451