

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000000333

Entity Name: PRAXIS PRECISION MEDICINES, INC.**Current Principal Place of Business:**ONE BROADWAY
16TH FLOOR
CAMBRIDGE, MA 02142**Current Mailing Address:**ONE BROADWAY
16TH FLOOR
CAMBRIDGE, MA 02142 US**FEI Number:** 47-5195942**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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 CHIEF PEOPLE OFFICER
Name MCCUE, KELLY
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title DIRECTOR
Name MITCHELL, DEAN
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title SECRETARY
Name NEMIROFF, ALEX
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title DIRECTOR
Name NORDEN, GREGORY
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title CHAIRMAN OF THE BOARD
Name MITCHELL, DEAN
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title GENERAL COUNSEL
Name NEMIROFF, ALEX
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title CHIEF COMMERCIAL OFFICER
Name SWEENY, NICOLE
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title DIRECTOR
Name REDDY, KIRAN
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

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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: ALEX NEMIROFF**SECRETARY****04/24/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name YOUNG, WILLIAM
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title DIRECTOR
Name GALAKATOS, NICHOLAS
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title PRESIDENT/CEO
Name SOUZA, MARCIO
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title DIRECTOR
Name VITOROVIC, STEFAN
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142

Title CMO
Name RAVINA, BERNARD
Address ONE BROADWAY
16TH FLOOR
City-State-Zip: CAMBRIDGE MA 02142