

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F21000005914

**Entity Name:** SANA BIOTECHNOLOGY, INC.

**Current Principal Place of Business:**

188 EAST BLAINE STREET SUITE 400  
SEATTLE, WA 98102

**Current Mailing Address:**

188 EAST BLAINE STREET SUITE 400  
SEATTLE, WA 98102 US

**FEI Number:** 83-1381173

**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 BISHOP, HANS  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title DIRECTOR  
Name MULLIGAN, RICHARD  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title DIRECTOR  
Name NELSEN, ROBERT  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title DIRECTOR  
Name DANIEL, THOMAS  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title DIRECTOR, PRESIDENT  
Name HARR, STEVEN D  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title DIRECTOR  
Name PAYTON, DONALD  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title DIRECTOR  
Name YANG, PATRICK  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title DIRECTOR  
Name KNIGHT, STEPHEN  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

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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:** JAMES J. MACDONALD

**SECRETARY**

**04/25/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MALTZAHN, GEOFFREY VON  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title SECRETARY  
Name MACDONALD, JAMES J.  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title DIRECTOR  
Name AFEYAN, NOUBAR  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102

Title TREASURER  
Name HARDY, NATHAN  
Address 1616 EASTLAKE AVENUE EAST  
SUITE 360  
City-State-Zip: SEATTLE WA 98102