2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: SANFORD-BURNHAM MEDICAL RESEARCH INSTITUTE, INC.

Current Principal Place of Business:

6400 SANGER ROAD
ORLANDO, FL 32827

New Principal Place of Business:

Current Mailing Address:

6400 SANGER ROAD
ORLANDO, FL 32827

New Mailing Address:

FEI Number: 51-0197108 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOLLAR, MICHAEL D VP
6400 SANGER ROAD
ORLANDO, FL 32827 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: C
Name: FISHBURN, M. WAINRIGHT CHAIRMN
Address: 10901 NORTH TORREY PINES ROAD
City-St-Zip: LA JOLLA, CA 92037

Title: CEO
Name: REED, M.D. PH.D, JOHN C CEO
Address: 10901 NORTH TORREY PINES ROAD
City-St-Zip: LA JOLLA, CA 92037

Title: PRES
Name: VUORI, M.D. PH.D, KRISTINA PRES
Address: 10901 NORTH TORREY PINES ROAD
City-St-Zip: LA JOLLA, CA 92037

Title: CAO
Name: RAISL, ED.D, GARY CAO,CFO
Address: 10901 NORTH TORREY PINES ROAD
City-St-Zip: LA JOLLA, CA 92037

Title: S
Name: DUNBAR, MARGARET SCRTARY
Address: 10901 NORTH TORREY PINES ROAD
City-St-Zip: LA JOLLA, CA 92037

Title: VP
Name: DOLLAR, MICHAEL VP FIN
Address: 6400 SANGER ROAD
City-St-Zip: ORLANDO, FL 32827

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL DOLLAR VP 01/27/2012

Electronic Signature of Signing Officer or Director — Date