

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000001257

**FILED**  
**Aug 10, 2011**  
**Secretary of State**

**Entity Name:** CANGENE BIOPHARMA, INC.

**Current Principal Place of Business:**

1111 S. PACE STREET  
BALTIMORE, MD 21320

**New Principal Place of Business:**

1111 S. PACA STREET  
BALTIMORE, MD 21320

**Current Mailing Address:**

1111 S. PACE STREET  
BALTIMORE, MD 21320

**New Mailing Address:**

1111 S. PACA STREET  
BALTIMORE, MD 21320

**FEI Number:** 52-1176514

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CFOT  
Name: GRAHAM, MICHAEL  
Address: 98 BERGMAN CRESENT  
City-St-Zip: WINNIPEG MANITOBA R3R 1Z7,

Title: D  
Name: GRAHAM, MICHAEL  
Address: 98 BERGMAN CRESENT  
City-St-Zip: WINNIPEG MANITOBA R3R 1Z7,

Title: SD  
Name: ST. HILAIRE, FRANCIS J  
Address: 39 KINGSVRIDGE COURT  
City-St-Zip: WINNIPEG MANITOBA R3P 2P9,

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: JEFFREY MONAHAN

ACCO

08/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date