## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F11000001835

**Entity Name: INCYTE CORPORATION** 

FILED Apr 17, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

**EXPERIMENTAL STATION ROUTE 141 & HENRY** EXPERIMENTAL STATION RTE 141 & HENRY CLAY

CLAY RD BLDG E336 RD BLDG E336 WILMINGTON, DE 19880

WILMINGTON, DE 19880

**New Mailing Address: Current Mailing Address:** 

**EXPERIMENTAL STATION ROUTE 141 & HENRY** EXPERIMENTAL STATION RTE 141 & HENRY CLAY

RD BLDG E336 CLAY RD BLDG E336

WILMINGTON, DE 19880 WILMINGTON, DE 19880

FEI Number: 94-3136539 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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

## **OFFICERS AND DIRECTORS:**

Title: **PCFO** 

Name: FRIEDMAN MD., PAUL A

EXPERIMENTAL STATION RTE 141 & HENRY CLAY Address:

City-St-Zip: WILMINGTON, DE 19880

Title: **VCFO** 

HASTINGS, DAVID C Name:

EXPERIMENTAL STATION RTE 141 & HENRY CLAY Address:

WILMINGTON, DE 19880 City-St-Zip:

Title: FVP

SWAIN, PAULA J Name:

**EXPERIMENTAL STATION RTE 141 & HENRY CLAY** Address:

City-St-Zip: WILMINGTON, DE 19880

Title: **VPGC** 

SCHRECK, PATRICIA A Name:

Address: EXPERIMENTAL STATION RTE 141 & HENRY CLAY

City-St-Zip: WILMINGTON, DE 19880

Title: vcco

Name: ANDREWS, PATRICIA

**EXPERIMENTAL STATION ROUTE 141 & HENRY** Address:

City-St-Zip: WILMINGTON, DE 19880

Title:

Name: LEVY, RICHARD S

**EXPERIMENTAL STATION ROUTE 141 & HENRY** Address:

City-St-Zip: WILMINGTON, DE 19880

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: DAVID C. HASTINGS **VCFO** 04/17/2012