

**FILED**  
**Jun 20, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90206 049 \*\*\*150.00

**2001 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # F94000004442**

1. Entity Name

**IMMUNEX CORPORATION**

Principal Place of Business

**51 UNIVERSITY ST.  
SEATTLE WA 98101**

Mailing Address

**51 UNIVERSITY ST.  
SEATTLE WA 98101**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **51-0346580**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CARR, JOSEPH J</b> <b>FIVE GIRALDA FARMS</b> <b>MADISON NJ</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Lawrence V. Stein</b> <b>Five Giralda Farms</b> <b>Madison, NJ 07940</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MAHADY, JOSEPH M</b> <b>555 E LANCASTER AVE</b> <b>ST DAVIDS PA 19087</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MARTIN, EDITH W</b> <b>2112 HIDDEN RANCH LN</b> <b>JACKSON WY 83001</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CRAMER, KIRBY L SR</b> <b>3755 CARILLON POINT</b> <b>KIRKLAND WA 98101</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DC</b> <b>FRITZKY, EDWARD V</b> <b>51 UNIVERSITY ST.</b> <b>SEATTLE WA 98101</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PHILLIPS, PEGGY V</b> <b>51 UNIVERSITY STREET</b> <b>SEATTLE WA</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO/Exec VP / Treasurer</b> <b>David A. Mann</b> <b>51 University Street</b> <b>Seattle WA 98101</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**DAVID A. MANN**

Date

**7/20/01**

Daytime Phone #

**206 587-0430**

CR2E034 (10/00)

**Immunex Corporation**  
**Corporation Officers**  
03/14/2001

Attachment  
8023  
#F9#000004442

Name	Official Title	Work Address	Telephone
Edward V. Fritzky	Chairman of Board Chief Executive Officer President	51 University Street Seattle, WA 98101	206 587-0430 office
Barry G. Pea	Sr Vice President General Counsel Secretary	51 University Street Seattle, WA 98101	206 587-0430 office
David A. Mann	Exec. Vice President Chief Financial Officer Treasurer	51 University Street Seattle, WA 98101	206 587-0430 office
Peggy V. Phillips	Exec. Vice President Chief Operating Officer	51 University Street Seattle, WA 98101	206 587-0430 office
Douglas E. Williams	Exec. Vice President Chief Technology Officer	51 University Street Seattle, WA 98101	206 587-0430 office

**Immunex Corporation**  
**Board of Directors**  
03/14/2001

Attachment  
8023

#F94000004442

Name	Work Address	Telephone #
Lawrence V. Stein	American Home Products Corporation Five Giralda Farms Madison, NJ 07940	973-660-6138
Kirby L. Cramer, Sr.	243 Lake Avenue West Kirkland, WA 98033	425-827-4800
Edward V. Fritzky	51 University Street Seattle, WA 98101	206-587-0430
John E. Lyons	7 Charles Fort Place Hilton Head Island, SC 29926	803-681-7225
Joseph M. Mahady	Wyeth-Ayerst North America 555 E. Lancaster Avenue St. Davids, PA 19087	610-971-5700
Edith W. Martin	2112 Hidden Ranch Lane Jackson, WY 83001	307-733-8124
Peggy V. Phillips	51 University Street Seattle, WA 98101	206-587-0430
Douglas E. Williams	51 University Street Seattle, WA 98101	206-587-0430
Robert J. Herbold	One Microsoft Way Redmond, WA 98052	425 936-9279