

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J32538

**Entity Name:** COVANCE CLINICAL RESEARCH UNIT INC.

**Current Principal Place of Business:**

3402 KINSMAN BLVD  
MADISON, WI 53704

**Current Mailing Address:**

3402 KINSMAN BLVD  
MADISON, WI 53704 US

**FEI Number: 58-1695239**

**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, TREASURER, SENIOR  
VICE PRESIDENT  
Name PRINGLE, ROBERT S.  
Address 206 CARNEGIE CENTER  
City-State-Zip: PRINCETON NJ 08540

Title DIRECTOR, CHIEF MEDICAL OFFICER  
Name COHEN, OREN  
Address 3402 KINSMAN BLVD  
City-State-Zip: MADISON WI 53704

Title AUTHORIZED PERSON  
Name TILLMANN, ANGELIKA  
Address 3402 KINSMAN BLVD  
City-State-Zip: MADISON WI 53704

*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: ANGELIKA TILLMANN**

**AUTHORIZED PERSON**

**03/10/2020**

Electronic Signature of Signing Officer/Director Detail

Date