## 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0900004148

Entity Name: INOGEN, INC.

#### **Current Principal Place of Business:**

326 BOLLAY DRIVE GOLETA, CA 93117

### **Current Mailing Address:**

326 BOLLAY DRIVE GOLETA, CA 93117

## FEI Number: 33-0989359

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

Electronic Olympications of Devictore d Ameri

INCORP SERVICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 US

Apr 21, 2015 Secretary of State CC2681278945

FILED

Certificate of Status Desired: No

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:

Name

Address

	Electronic Signature of Registered Agent							
Officer/Director Detail :								
Title	PRESIDENT, DIRECTOR	Title	SECRETARY, CFO					
Name	HUGGENBERGER, RAY	Name	BAUERLEIN, ALISON K					
Address	326 BOLLAY DRIVE	Address	326 BOLLAY DRIVE					
City-State-Zip:	GOLETA CA 93117	City-State-Zip:	GOLETA CA 93117					
Title	CHAIRMAN	Title	DIRECTOR					
Name	LUKATCH, HEATH	Name	RIDER, HEATHER					
Address	1700 OWENS STREET, SUITE 540	Address	326 BOLLAY DRIVE					
City-State-Zip:	SAN FRANCISCO CA 94158	City-State-Zip:	GOLETA CA 93117					
Title	DIRECTOR	Title	DIRECTOR					
Name	MCFARLAND, LOREN	Name	PETERSEN, TIMOTHY					
Address	326 BOLLAY DRIVE	Address	334 EAST WASHINGTON STREET					
City-State-Zip:	GOLETA CA 93117	City-State-Zip:	ANN ARBOR MI 48104					
Title	DIRECTOR	Title	VP					

City-State-Zip: GOLETA CA 93117

ANDERSON-RAY, BENJAMIN

326 BOLLAY DRIVE

## Continues on page 2

Name

Address

City-State-Zip:

MYERS, BYRON

326 BOLLAY DRIVE

GOLETA CA 93117

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: ALISON BAUERLEIN

CFO

Date

Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail Continued :**

Title	VP	Title	VP
Name	SCRIBNER, MATTHEW	Name	TAYLOR, BRENTON
Address	326 BOLLAY DRIVE	Address	326 BOLLAY DRIVE
City-State-Zip:	GOLETA CA 93117	City-State-Zip:	GOLETA CA 93117
Title	VP		
Thuc	VI.		

NameWILKINSON, SCOTTAddress326 BOLLAY DRIVECity-State-Zip:GOLETA CA 93117