

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000004254

Entity Name: FOUNDATION MEDICINE, INC.**Current Principal Place of Business:**150 SECOND STREET
CAMBRIDGE, MA 02141**Current Mailing Address:**150 SECOND STREET
CAMBRIDGE, MA 02141 US**FEI Number: 27-1316416****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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
Name BORISY, ALEXIS
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name LEVIN, MARK
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

Title TREASURER
Name RYAN, JASON
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name SHENKEIN, DAVID MD
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name BYERS, BROOK
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR, PRESIDENT
Name PELLINI, MICHAEL J. MD
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

Title SECRETARY
Name HESSLEIN, ROBERT W.
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR
Name YESHWANT, KRISHNA MD
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

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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: DEAN RAPAPORT**AUTHORIZED PERSON****04/15/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JONES, EVAN
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141

Title DIRECTOR OF FINANCE
Name RAPAPORT, DEAN
Address 150 SECOND STREET
City-State-Zip: CAMBRIDGE MA 02141