

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001268

Entity Name: LONZA AMERICA INC.**Current Principal Place of Business:**C/O LONZA AMERICA INC.
90 BOROLINE ROAD
ALLENDAL, NJ 07401**Current Mailing Address:**C/O LONZA AMERICA INC.
90 BOROLINE ROAD
ALLENDAL, NJ 07401 US**FEI Number:** 22-2188958**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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 CFO, VP, TREASURER, DIRECTOR
Name HOY, ALEXANDER
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title PRESIDENT, DIRECTOR
Name WALDMAN, SCOTT B
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title ASSISTANT SECRETARY, ASSISTANT
TREASURER
Name BRANCIFORTE, ANTHONY
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title ASSISTANT TREASURER
Name OLSON, RICHARD L
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title ASSISTANT TREASURER
Name HARTFORD, PHYLLIS K
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title ASSISTANT TREASURER
Name SERENO, MICHAEL
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title VP, INTELLECTUAL PROPERTY
Name KATCHEVES, KONSTANTINA
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title ASSISTANT SECRETARY
Name HARRELSON, KIMBERLY COX
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

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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: WALDMAN, SCOTT BPRESIDENT, DIANE
CHICHESTER,
ATTORNEY-IN-FACT

04/19/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name DOLES, DAVE
Address C/O LONZA AMERICA INC.
90 BOROLINE RD.
City-State-Zip: ALLENDALE NJ 07401

Title VP, HUMAN RESOURCES
Name MINASSIAN, MAILET
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title DIRECTOR
Name SAVITSKY, RODOLFO
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401

Title ASST. SECRETARY
Name LURIA , BRADLEY G
Address C/O LONZA AMERICA INC.
90 BOROLINE ROAD
City-State-Zip: ALLENDALE NJ 07401