

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000000380

**Entity Name:** REGENERON HEALTHCARE SOLUTIONS, INC.

**Current Principal Place of Business:**

745 OLD SAW MILL RIVER ROAD  
TARRYTOWN, NY 10591

**Current Mailing Address:**

745 OLD SAW MILL RIVER ROAD  
TARRYTOWN, NY 10591 US

**FEI Number: 47-2092474**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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/MANAGER  
Name LANDRY, ROBERT  
Address 745 OLD SAW MILL RIVER ROAD  
City-State-Zip: TARRYTOWN NY 10591

Title SECRETARY  
Name LAROSA, JOSEPH J.  
Address 745 OLD SAW MILL RIVER ROAD  
City-State-Zip: TARRYTOWN NY 10591

Title TREASURER  
Name COLYER, JENNIFER  
Address 745 OLD SAW MILL RIVER ROAD  
City-State-Zip: TARRYTOWN NY 10591

Title VP  
Name O'NEAL, RICHARD  
Address 745 OLD SAW MILL RIVER ROAD  
City-State-Zip: TARRYTOWN NY 10591

Title VP  
Name TEGAN, DEBORAH  
Address 745 OLD SAW MILL RIVER ROAD  
City-State-Zip: TARRYTOWN NY 10591

Title VP  
Name WILLIAMS, MONIKA  
Address 745 OLD SAW MILL RIVER ROAD  
City-State-Zip: TARRYTOWN NY 10591

Title VP  
Name JONES, MICHAEL  
Address 745 OLD SAW MILL RIVER ROAD  
City-State-Zip: TARRYTOWN NY 10591

Title VP  
Name SUESSERMAN, MICHAEL  
Address 745 OLD SAW MILL RIVER ROAD  
City-State-Zip: TARRYTOWN NY 10591

*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: LAROSA JOSEPH J.**

**SECRETARY**

**02/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date