

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000005499

**Entity Name:** NEUROCRINE BIOSCIENCES, INC.**Current Principal Place of Business:**12780 EL CAMINO REAL  
SAN DIEGO, CA 92130**Current Mailing Address:**12780 EL CAMINO REAL  
SAN DIEGO, CA 92130 US**FEI Number:** 33-0525145**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  
Name GORMAN, KEVIN C PH.D.  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

Title SECRETARY  
Name LIPPOLDT, DARIN  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name RASTETTER, WILLIAM H PH.D.  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name LYONS, GARY A  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name POPS, RICHARD F  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name SHERWIN, STEPHEN A M.D.  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name SANDROCK, ALFRED W JR, M.D.,  
PH.D.  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name MORROW, GEORGE  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

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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:** DARIN LIPPOLDT**SECRETARY****04/17/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name NORWALK, LESLIE V.  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130

Title DIRECTOR  
Name SHARP, SHALINI  
Address 12780 EL CAMINO REAL  
City-State-Zip: SAN DIEGO CA 92130