## **2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000002492

Entity Name: AGIOS PHARMACEUTICALS, INC.

**Current Principal Place of Business:** 

88 SIDNEY STREET CAMBRIDGE, MA 02139

**Current Mailing Address:** 

88 SIDNEY STREET

CAMBRIDGE, MA 02139 US

FEI Number: 26-0662915 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

FILED Apr 24, 2021

**Secretary of State** 

6855036840CC

## Officer/Director Detail:

Title	DIRECTOR	Title	DIRECTOR
Name	MARAGANORE, JOHN	Name	CLANCY, PAUL
Address	88 SIDNEY STREET	Address	88 SIDNEY STREET
City-State-Zip:	CAMBRIDGE MA 02139	City-State-Zip:	CAMBRIDGE MA 02139

TitleCHIEF MEDICAL OFFICERTitleDIRECTORNameBOWDEN, CHRISNameHO, MAYKIN

Address 88 SIDNEY STREET Address 88 SIDNEY STREET

City-State-Zip: CAMBRIDGE MA 02139 City-State-Zip: CAMBRIDGE MA 02139

Title DIRECTOR Title DIRECTOR

Name FOSTER, KAYE Name CLARK, IAN

Address 88 SIDNEY STREET Address 88 SIDNEY STREET

City-State-Zip: CAMBRIDGE MA 02139 City-State-Zip: CAMBRIDGE MA 02139

Title DIRECTOR Title DIRECTOR

NameFOUSE, JACQUALYNNameSCADDEN, DAVIDAddress88 SIDNEY STREETAddress88 SIDNEY STREETCity-State-Zip:CAMBRIDGE MA 02139City-State-Zip:CAMBRIDGE MA 02139

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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: WILLIAM COOK SECRETARY 04/24/2021

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name SCHENKEIN, DAVID
Address 88 SIDNEY STREET
City-State-Zip: CAMBRIDGE MA 02139

Title CHIEF SCIENTIFIC OFFICER

Name CAR, BRUCE

Address 88 SIDNEY STREET

City-State-Zip: CAMBRIDGE MA 02139

Title TREASURER

NameBILLER, JONATHANAddress88 SIDNEY STREET

City-State-Zip: CAMBRIDGE MA 02139

Title ASSISTANT SECRETARY

Name BURNS, JAMES
Address 88 SIDNEY STREET
City-State-Zip: CAMBRIDGE MA 02139

Title CEO

Name FOUSE, JACQUALYN
Address 88 SIDNEY STREET
City-State-Zip: CAMBRIDGE MA 02139

Title CFO

Name BILLER, JONATHAN
Address 88 SIDNEY STREET
City-State-Zip: CAMBRIDGE MA 02139

Title SECRETARY
Name COOK, WILLIAM
Address 88 SIDNEY STREET
City-State-Zip: CAMBRIDGE MA 02139