2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2019
Secretary of State
3789434135CC

DOCUMENT# F18000001110

Entity Name: INSMED INCORPORATED

Current Principal Place of Business:

10 FINDERNE AVE, BLDG 10
BRIDEWATER, NJ 08807

Current Mailing Address:

10 FINDERNE AVE, BLDG 10
BRIDEWATER, NJ 08807 US

FEI Number: 54-1972729

Certificate of Status Desired: Yes

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	PCEO
Name	LEWIS, WILLIAM
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	CLO
Name	PELLIZZARI, CHRISTINE
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	D
Name	HAYDEN, DONALD J JR.
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	D
Name	LEWIS, WILLIAM H
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	CFO
Name	TOMBESI, PAOLO
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	CCO
Name	ADSETT, ROGER
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	D
Name	BRENNAN, DAVID R
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	D
Name	ENGELSEN, STEINAR J MD
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

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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: CHRISTINE PELLIZZARI CLO 04/02/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	D
Name	SHAROKY, MELVIN MD
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	D
Name	MCGIRR, DAVID W.J.
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	DIRECTOR
Name	LEE, LEO
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	D
Name	ALOMARI, ALFRED F
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807

Title	DIRECTOR
Name	ANDERSON, ELIZABETH
Address	10 FINDERNE AVE, BLDG 10
City-State-Zip:	BRIDEWATER NJ 08807