2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2024
Secretary of State
1723052470CC

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Entity Name: SIMULATIONS PLUS, INC.

Current Principal Place of Business:

42505 10TH STREET
WEST LANCASTER, CA 93534

Current Mailing Address:

42505 10TH STREET
WEST LANCASTER, CA 93534 US

FEI Number: 95-4595609

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	SECRETARY, TREASURER
Name	FREDERICK, WILLIAM
Address	42505 10TH STREET
City-State-Zip:	WEST LANCASTER CA 93534

Title	DIRECTOR
Name	PAGLIA, JOHN PH.D.
Address	42505 10TH STREET
City-State-Zip:	WEST LANCASTER CA 93534

Title	PRESIDENT
Name	O'CONNOR, SHAWN
Address	42505 10TH STREET
City-State-Zip:	WEST LANCASTER CA 93534

Title	DIRECTOR
Name	WOLTOSZ, WALTER
Address	42505 10TH STREET
City-State-Zip:	WEST LANCASTER CA 93534

Title	DIRECTOR
Name	WEINER, DANIEL PH.D.
Address	42505 10TH STREET
City-State-Zip:	WEST LANCASTER CA 93534

Title	DIRECTOR
Name	LAVANGE, LISA PH.D.
Address	42505 10TH STREET
City-State-Zip:	WEST LANCASTER CA 93534

Title	DIRECTOR
Name	EVANS, SHARLENE
Address	42505 10TH STREET
City-State-Zip:	WEST LANCASTER CA 93534

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 FREDERICK SECRETARY 02/08/2024

Electronic Signature of Signing Officer/Director Detail — Date