

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F24000001568

Entity Name: ANTHROPIC, PBC, INC.**Current Principal Place of Business:**500 HOWARD STREET
SAN FRANCISCO, CA 94105**Current Mailing Address:**548 MARKET STREET, PMB 90375
SAN FRANCISCO, CA 94104 US**FEI Number:** 86-1696045**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 CEO, DIRECTOR
Name AMODEI , DARIO
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title PRESIDENT, DIRECTOR
Name AMODEI, DANIELA
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title CFO
Name RAO, KRISHNA
Address 333 BUSH ST., 4TH FL
City-State-Zip: SAN FRANCISCO CA 94104-2806

Title SECRETARY, GENERAL COUNSEL
Name ISRAEL, BRIAN
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title CSO
Name KAPLAN, JARED
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title CHIEF INFORMATION AND SECURITY OFFICER
Name MCCANDLISH , SAM
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title ASST. SECRETARY
Name EKERUO , PATRICK
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name KREPS, JAY
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105

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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: PATRICK EKERUO**ASSISTANT SECRETARY 05/08/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RAZAVI, YASMIN
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name HASTINGS , REED
Address 500 HOWARD STREET
City-State-Zip: SAN FRANCISCO CA 94105