

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 810705

Entity Name: BRISTOL-MYERS SQUIBB COMPANY

Current Principal Place of Business:

TAX DEPT - 3RD FLOOR
345 PARK AVE
NEW YORK, NY 10154

FILED
Apr 19, 2016
Secretary of State
CC3137633187

Current Mailing Address:

TAX DEPT - 3RD FLOOR
345 PARK AVE
NEW YORK, NY 10154 US

FEI Number: 22-0790350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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 CFO, EVP
Name BANCROFT, CHARLES
Address ROUTE 206 & PROVINCE LINE RD.
City-State-Zip: PRINCETON NJ 08543

Title T
Name GALIK, JEFFREY
Address ROUTE 206 & PROVINCE LINE RD.
City-State-Zip: PRINCETON NJ 08543

Title GENERAL COUNSEL
Name LEUNG, SANDRA
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title CHAIRMAN
Name ANDREOTTI, LAMBERTO
Address RTE 206 & PROVINCE LINE ROAD
City-State-Zip: PRINCETON NJ 08543

Title SVP
Name LEWBEL, GARY
Address 345 PARK AVENUE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name LACY, ALAN J
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name STORCH, GERALD L
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name GLIMCHER, LAURIE DR.
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Continues on page 2

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: GARY LEWBEL

SR. VP TAXES

04/19/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CAMPBELL, LEWIS B
Address TAX DEPT - 3RD FLOOR
345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name PALIWAL, DINESH C
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name SATO, VICKI L PHD
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name LYNCH, THOMAS J JR., M.D.
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name ARDUINI, PETER SR.
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name GROBSTEIN, MICHAEL
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title DIRECTOR
Name WEST, TOGO D JR.
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154

Title CONTROLLER, SVP
Name CALDARELLA, JOSEPH
Address ROUTE 206 & PROVINCE LINE ROAD
City-State-Zip: PRINCETON NJ 08543

Title DIRECTOR, CEO
Name CAFORIO, GIOVANNI
Address ROUTE 206 & PROVINCE LINE RD.
City-State-Zip: PRINCETON NJ 08543

Title SECRETARY
Name KELLY, KATHERINE R
Address 345 PARK AVE
City-State-Zip: NEW YORK NY 10154