

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003134

Entity Name: DARA BIOSCIENCES, INC.**Current Principal Place of Business:**8601 SIX FORKS ROAD
SUITE 160
RALEIGH, NC 27615**Current Mailing Address:**8601 SIX FORKS ROAD
SUITE 160
RALEIGH, NC 27615**FEI Number:** 04-3216862**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 DIRECTOR
Name HEADY, STEPHEN
Address 8601 SIX FORKS ROAD
SUITE 160
City-State-Zip: RALEIGH NC 27615

Title PRESIDENT
Name CLEMENT, CHRISTOPHER G
Address 8601 SIX FORKS ROAD #160
City-State-Zip: RALEIGH NC 27615

Title CFO
Name TOUSLEY, DAVID L
Address 8601 SIX FORKS ROAD #160
City-State-Zip: RALEIGH NC 27615

Title DIRECTOR
Name RICHARDSON, PAUL
Address 8601 SIX FORKS ROAD
SUITE 160
City-State-Zip: RALEIGH NC 27615

Title DCEO
Name DRUTZ, DAVID J
Address 8601 SIX FORKS ROAD #160
City-State-Zip: RALEIGH NC 27615

Title CHAIRMAN
Name COCHRAN, HAYWOOD
Address 8601 SIX FORKS ROAD
SUITE 160
City-State-Zip: RALEIGH NC 27615

Title DIRECTOR
Name LIEBERMAN, GAIL
Address 8601 SIX FORKS ROAD
SUITE 160
City-State-Zip: RALEIGH NC 27615

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: DAVID TOUSLEY

CFO

03/13/2014

Electronic Signature of Signing Officer/Director Detail

Date