

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J32538

Entity Name: COVANCE CLINICAL RESEARCH UNIT INC.

Current Principal Place of Business:

3402 KINSMAN BLVD
MADISON, WI 53704

Current Mailing Address:

3402 KINSMAN BLVD
MADISON, WI 53704 US

FEI Number: 58-1695239

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, TREASURER, SENIOR
VICE PRESIDENT
Name PRINGLE, ROBERT S.
Address 206 CARNEGIE CENTER
City-State-Zip: PRINCETON NJ 08540

Title DIRECTOR, CHIEF MEDICAL OFFICER
Name COHEN, OREN
Address 3402 KINSMAN BLVD
City-State-Zip: MADISON WI 53704

Title AUTHORIZED PERSON
Name TILLMANN, ANGELIKA
Address 3402 KINSMAN BLVD
City-State-Zip: MADISON WI 53704

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: ANGELIKA TILLMANN

AUTHORIZED PERSON

03/10/2020

Electronic Signature of Signing Officer/Director Detail

Date