

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213518964

1.) CORPORATION NAME:

GENENTECH, INC.

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1026162**

5.) STOCK INFORMATION

CLASS AUTHORIZED

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE DNA WAY

CITY/ST/ZIP: S SAN FRANCISCO, CA 94080

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: FREDERICK C KENTZ III
TITLE: SR VP/S/CCO
ADDRESS: 1 DNA WAY
CITY/ST/ZIP/CO: S SAN FRANCISCO, CA 94080

OFFICER DIRECTOR

NAME: IAN T CLARK
TITLE: CEO
ADDRESS: 1 DNA WAY
CITY/ST/ZIP/CO: SOUTH SAN FRANCISCO, CA 94080

OFFICER DIRECTOR

NAME: STEVE E KROGNES
TITLE: CFO/SRVP/
ADDRESS: I DNA WAY
CITY/ST/ZIP/CO: SOUTH SAN FRANCISCO, CA 94080

OFFICER DIRECTOR

NAME: PROFESSOR SIR JOHN IRVING BELL
TITLE: DIRECTOR
ADDRESS: 1 DNA WAY
CITY/ST/ZIP/CO: SOUTH SAN FRANCISCO, CA 94080

OFFICER DIRECTOR

NAME: Severin Schwan, PH.D.
TITLE: DIRECTOR
ADDRESS: 1 DNA Way
CITY/ST/ZIP/CO: South San Francisco, CA 94080

OFFICER DIRECTOR

NAME: Arthur D. Levinson, Ph.D.
TITLE: DIRECTOR
ADDRESS: 1 DNA Way
CITY/ST/ZIP/CO: South San Francisco, CA 94080

OFFICER DIRECTOR

| | | |
|--|---|-------------------|
| NAME: William M. Burns TITLE: DIRECTOR ADDRESS: 1 DNA Way CITY/ST/ZIP/CO: South San Francisco, CA 94080 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: Andre Hoffmann TITLE: DIRECTOR ADDRESS: 1 DNA Way CITY/ST/ZIP/CO: South San Francisco, CA 94080 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: Daniel O TITLE: DIRECTOR ADDRESS: 1 DNA Way CITY/ST/ZIP/CO: South San Francisco, CA 94080 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: Dr. Alan Hippe TITLE: DIRECTOR ADDRESS: 1 DNA Way CITY/ST/ZIP/CO: South San Francisco, CA 94080 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. | | |
| /s/ FREDERICK C KENTZ III SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | FREDERICK C KENTZ III, SR VP/S/CCO PRINTED NAME AND CORPORATE TITLE | 4/22/2013 DATE |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. | | |