

1.) CORPORATION NAME:

WYETH PHARMACEUTICALS INC.

DUE DATE: **5/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA**

SCC ID NO: **F1549783**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 500 Arcola Road

CITY/ST/ZIP: Collegeville, PA 19426

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: Claire G. Keyles TITLE: VICE PRESIDENT ADDRESS: 500 Arcola Road CITY/ST/ZIP/CO: Collegeville, PA 19426	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Brian McMahon TITLE: TREASURER ADDRESS: 500 Arcola Road CITY/ST/ZIP/CO: Collegeville, PA 19426	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Susan Grant TITLE: SECRETARY ADDRESS: 500 Arcola Road CITY/ST/ZIP/CO: Collegeville, PA 19426	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Matthew Lepore TITLE: DIRECTOR ADDRESS: 500 Arcola Road CITY/ST/ZIP/CO: Collegeville, PA 19426	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: William Carapezzi TITLE: DIRECTOR ADDRESS: 500 Arcola Road CITY/ST/ZIP/CO: Collegeville, PA 19426	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Susan Courson-Smith TITLE: Asst. Secretary ADDRESS: 500 Arcola Road CITY/ST/ZIP/CO: Collegeville, PA 19426	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Geno J. Germano TITLE: PRESIDENT ADDRESS: 500 Arcola Road CITY/ST/ZIP/CO: Collegeville, PA 19426	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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.

<u>/s/ Susan Courson-Smith</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>Susan Courson-Smith, Asst. Secretary</u> PRINTED NAME AND CORPORATE TITLE	<u>4/26/2013</u> DATE
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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.