

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 813457

FILED
Apr 30, 2010
Secretary of State

Entity Name: CYSTIC FIBROSIS FOUNDATION

Current Principal Place of Business:

6931 ARLINGTON RD.
SUITE 200
BETHESDA, MD 20814 US

New Principal Place of Business:

Current Mailing Address:

6931 ARLINGTON RD.
SUITE 200
BETHESDA, MD 20814 US

New Mailing Address:

FEI Number: 13-1930701 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VC
Name: DANDURAND, RICHARD L
Address: 6931 ARLINGTON ROAD, SUITE 200
City-St-Zip: BETHESDA, MD 20814

Title: LCC
Name: GUMP, BARRY M
Address: 6931 ARLINGTON ROAD, SUITE 200
City-St-Zip: BETHESDA, MD 20814

Title: PCEO
Name: BEALL, ROBERT J PHD
Address: 6931 ARLINGTON ROAD, SUITE 200
City-St-Zip: BETHESDA, MD 20814

Title: SVP
Name: TWIGG, VERA H
Address: 6931 ARLINGTON ROAD, SUITE 200
City-St-Zip: BETHESDA, MD 20814

Title: C
Name: MCLLOUD, CATHERINE C
Address: 6931 ARLINGTON ROAD, SUITE 200.
City-St-Zip: BETHESDA, MD 20814

Title: SEC
Name: MATTINGLY, C. RICHARD
Address: 6931 ARLINGTON ROAD, SUITE 200
City-St-Zip: BETHESDA, MD 20814

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VERA H. TWIGG

SVP

04/30/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date