2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 813457

Entity Name: CYSTIC FIBROSIS FOUNDATION

Current Principal Place of Business:

6931 ARLINGTON RD. SUITE 200 BETHESDA, MD 20814

Current Mailing Address:

6931 ARLINGTON RD. SUITE 200 BETHESDA, MD 20814 US

FEI Number: 13-1930701

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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

Officer/Director Detail :

Title	DIRECTOR	Title	DIRECTOR		
Name	DANDURAND, RICHARD L	Name	GUMP, BARRY M		
Address	6931 ARLINGTON ROAD, SUITE 200	Address	6931 ARLINGTON ROAD, SUITE 200		
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814		
Title Name Address City-State-Zip:	PRESIDENT & CEO BEALL, PH.D. , ROBERT J 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814	Title Name Address City-State-Zip:	SR VP AND CFO TWIGG, VERA H 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814		
Title Name Address City-State-Zip:	DIRECTOR MCLOUD, CATHERINE C 6931 ARLINGTON ROAD, SUITE 200. BETHESDA MD 20814	Title Name Address City-State-Zip:	EXECUTIVE VP, COO AND SECRETARY MATTINGLY, C. RICHARD 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814		
Title Name Address City-State-Zip:	EXECUTIVE VP FOR MEDICAL AFFAIRS, ASST SECRETARY CAMPBELL, PRESTON W III 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814	Title Name Address City-State-Zip:	DIRECTOR BEATTY, MICHAEL L 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814		

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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

Electronic Signature of Signing Officer/Director Detail

FILED Mar 24, 2014 Secretary of State CC6074143442

Certificate of Status Desired: Yes

Date

EXEC VP & CFO

03/24/2014

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	CRANDALL, J TAYLOR	Name	GRAY, RICHARD J
Address	6931 ARLINGTON ROAD, SUITE 200	Address	6931 ARLINGTON ROAD, SUITE 200
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814
T		Title	DIRECTOR
Title	DIRECTOR		
Name	HOOK, SUSAN L	Name	MOORE, CHAD T
Address	6931 ARLINGTON ROAD, SUITE 200	Address	6931 ARLINGTON ROAD, SUITE 200
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814
Title	DIRECTOR	Title	DIRECTOR
Name	MOUNT, DAVID A	Name	SABIN, GARY B
Address	6931 ARLINGTON ROAD, SUITE 200	Address	6931 ARLINGTON ROAD, SUITE 200
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814
Title		Title	DIRECTOR
Title			DIRECTOR SHAK, M.D., STEVEN
Name	SHAFFER, PH.D. , CHRISTY L	Name	SHAK, M.D. , STEVEN
		Name Address	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200
Name	SHAFFER, PH.D. , CHRISTY L	Name	SHAK, M.D. , STEVEN
Name Address	SHAFFER, PH.D. , CHRISTY L 6931 ARLINGTON ROAD, SUITE 200	Name Address	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200
Name Address City-State-Zip:	SHAFFER, PH.D. , CHRISTY L 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814	Name Address City-State-Zip:	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814
Name Address City-State-Zip: Title	SHAFFER, PH.D. , CHRISTY L 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR	Name Address City-State-Zip: Title	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR
Name Address City-State-Zip: Title Name	SHAFFER, PH.D. , CHRISTY L 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR THAYER , CHARLES J	Name Address City-State-Zip: Title Name	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR WEINBERG, AMY S 6931 ARLINGTON ROAD, SUITE 200
Name Address City-State-Zip: Title Name Address City-State-Zip:	SHAFFER, PH.D. , CHRISTY L 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR THAYER , CHARLES J 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814	Name Address City-State-Zip: Title Name Address	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR WEINBERG, AMY S 6931 ARLINGTON ROAD, SUITE 200
Name Address City-State-Zip: Title Name Address City-State-Zip: Title	SHAFFER, PH.D. , CHRISTY L 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR THAYER , CHARLES J 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR	Name Address City-State-Zip: Title Name Address City-State-Zip:	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR WEINBERG, AMY S 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR
Name Address City-State-Zip: Title Name Address City-State-Zip: Title Name	SHAFFER, PH.D. , CHRISTY L 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR THAYER , CHARLES J 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR WHETSELL, PAUL W	Name Address City-State-Zip: Title Name Address City-State-Zip: Title Name	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR WEINBERG, AMY S 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR WHITE , KC BRYAN
Name Address City-State-Zip: Title Name Address City-State-Zip: Title	SHAFFER, PH.D. , CHRISTY L 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR THAYER , CHARLES J 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR	Name Address City-State-Zip: Title Name Address City-State-Zip: Title	SHAK, M.D. , STEVEN 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR WEINBERG, AMY S 6931 ARLINGTON ROAD, SUITE 200 BETHESDA MD 20814 DIRECTOR WHITE , KC BRYAN 6931 ARLINGTON ROAD, SUITE 200