

**2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 814991

**Entity Name:** THE LEUKEMIA & LYMPHOMA SOCIETY, INC.

**Current Principal Place of Business:**

3 INTERNATIONAL DRIVE  
SUITE 200  
RYE BROOK, NY 10573

**FILED**  
**May 18, 2016**  
**Secretary of State**  
**CC4365334094**

**Current Mailing Address:**

3 INTERNATIONAL DRIVE  
SUITE 200  
RYE BROOK, NY 10573 US

**FEI Number: 13-5644916**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

JONES, TERRI  
200 S. PARK ROAD  
SUITE 140  
HOLLYWOOD, FL 33021 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: TERRI JONES**

**05/18/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           DEGENNARO, LOUIS  
Address        3 INTERNATIONAL DRIVE  
                  SUITE 200  
City-State-Zip: RYE BROOK NY 10573

Title           CFO  
Name           LOFFREDO, ROSEMARIE  
Address        3 INTERNATIONAL DRIVE  
                  SUITE 200  
City-State-Zip: RYE BROOK NY 10573

Title           SVP FINANCE  
Name           MILLER, JR, GORDON  
Address        3 INTERNATIONAL DRIVE  
                  SUITE 200  
City-State-Zip: RYE BROOK NY 10573

Title           CHAIRMAN OF THE BOARD  
Name           DAVIS, JAMES  
Address        3 INTERNATIONAL DRIVE  
                  SUITE 200  
City-State-Zip: RYE BROOK NY 10573

Title           VC  
Name           CLARK, ELIZABETH  
Address        3 INTERNATIONAL DRIVE  
                  SUITE 200  
City-State-Zip: RYE BROOK NY 10573

Title           SECRETARY/TREASURER  
Name           SCHWARTZ, KENNETH M.  
Address        3 INTERNATIONAL DRIVE  
                  SUITE 200  
City-State-Zip: RYE BROOK NY 10573

*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: MILLER, JR , GORDON**

**SVP FINANCE**

**05/18/2016**

Electronic Signature of Signing Officer/Director Detail

Date