2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001594

Entity Name: COLON CANCER ALLIANCE, INC.

Current Principal Place of Business:

1025 VERMONT AVE SUITE 1066 WASHINGTON, DC 20005

Current Mailing Address:

1025 VERMONT AVE SUITE 1066 WASHINGTON, DC 20005 US

FEI Number: 86-0947831

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 NORTH CALHOUN ST. SUITE 4 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	ANDREW HACKETT			04/23/2021	
	Electronic Signature of Registered Agent				
Officer/Direc	ctor Detail :				
Title	CO-FOUNDER, DIRECTOR	Title	DIRECTOR, VC		
Name	LEWIS, KEVIN	Name	VALVO, CARMEN MARC		
Address	185 ASYLUM STREET SUITE 2400	Address	1025 VERMONT AVE NW SUITE 1066		
City-State-Zip:	HARTFORD CT 06103	City-State-Zip:	WASHINGTON DC 20005		
Title	DIRECTOR	Title	DIRECTOR, SECRETARY		
Name	BACKUS, JOHN	Name	CLOWES, JULIE		
Address	1025 VERMONT AVE NW SUITE 1066	Address	1025 VERMONT AVE NW SUITE 1066		
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip:	WASHINGTON DC 20005		
Title	DIRECTOR	Title	DIRECTOR		
Name	SAPIENZA, FRANK L	Name	JACKSON, PATRICK MD		
Address	1025 VERMONT AVE NW SUITE 1066	Address	1025 VERMONT AVE NW SUITE 1066		
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip:	WASHINGTON DC 20005		
Title	CEO	Title	DIRECTOR		
Name	SAPIENZA, MICHAEL	Name	DRANIKOFF, LEE		
Address	1025 VERMONT AVE NW SUITE 1066	Address	1025 VERMONT AVE NW STE 1066		
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip:	WASHINGTON DC 20005		

Continues on page 2

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: MICHAEL SAPIENZA	CEO	04/23/2021

Electronic Signature of Signing Officer/Director Detail

FILED Apr 23, 2021 Secretary of State 7650611212CC

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

City-State-Zip: WASHINGTON DC 20005

Title	DIRECTOR	Title	DIRECTOR	
Name	LYNCH, MELISSA	Name	O'NEIL, MICHAEL	
Address	1025 VERMONT AVE NW STE 1066	Address	1025 VERMONT AVE NW STE 1066	
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip:	WASHINGTON DC 20005	
Title	DIRECTOR	Title	DIRECTOR	
Name	SCHEETZ, CLAY	Name	SCHOEMAN, DAVID	
Address	1025 VERMONT AVE NW STE 1066	Address	1025 VERMONT AVE NW STE 1066	
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip:	WASHINGTON DC 20005	
Title	DIRECTOR	Title	DIRECTOR	
Name	BENAIM, AVI	Name	AQUILINO, MICHAEL	
Address	1025 VERMONT AVE SUITE 1066	Address City-State-Zip:	1025 VERMONT AVE NW STE 1066 WASHINGTON DC 20005	
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip.	WASHINGTON DC 20003	
Title	DIRECTOR	Title	DIRECTOR	
Name	BELL, BROOKS	Name	GUEVARA, CHARLIE	
Address	1025 VERMONT AVE NW	Address	1025 VERMONT AVE NW STE 1066	
/1001000	SUITE 1066	City-State-Zip:	WASHINGTON DC 20005	
City-State-Zip:	WASHINGTON DC 20005	Title	DIRECTOR	
Title	DIRECTOR	Name	SETO, SHARON	
Name	MITCHELL, MD, FACP, FCPP, EDITH	Address	1025 VERMONT AVE NW STE 1066	
Address	1025 VERMONT AVE NW STE 1066	City-State-Zip:	WASHINGTON DC 20005	
City-State-Zip:	WASHINGTON DC 20005			
Title	DIRECTOR			
Name	WHALEN, JOE			
Address	1025 VERMONT AVE NW STE 1066			