

**2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000004946

**FILED**  
**Feb 04, 2013**  
**Secretary of State**  
**CC3458104170**

**Entity Name:** THE NHP FOUNDATION, INC.

**Current Principal Place of Business:**

122 EAST 42ND STREET  
SUITE 3605  
NEW YORK, NY 10168

**Current Mailing Address:**

122 EAST 42ND STREET  
SUITE 3605  
NEW YORK, NY 10168

**FEI Number: 52-1636004**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VPAS  
Name VACCARO, THOMAS  
Address 1090 VERMONT AVENUE, NW, SUITE 400  
City-State-Zip: WASHINGTON DC 20005

Title C  
Name BURNS, RICHARD FCEO  
Address 122 EAST 42ND STREET, SUITE 3605  
City-State-Zip: NEW YORK NY 10168

Title TREASURER  
Name PARKINSON, GARY J  
Address 122 EAST 42ND STREET, SUITE 3605  
City-State-Zip: NEW YORK NY 10168

Title SVPS  
Name WIEDORFER, JOE  
Address 1090 VERMONT AVENUE, NW SUITE 400  
City-State-Zip: WASHINGTON DC 20005

Title VP  
Name MITCHELL, FRED C  
Address 122 EAST 42ND STREET, 3605  
City-State-Zip: NEW YORK NY 10168

Title VP  
Name FRY, PATRICK J  
Address 122 EAST 42ND STREET STE 3605  
City-State-Zip: NEW YORK NY 10168

*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: THOMAS VACCARO**

**SECRETARY**

**02/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date