

**2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000004403

**Entity Name:** IOCC FOUNDATION INCORPORATED**Current Principal Place of Business:**110 WEST ROAD, SUITE 360  
BALTIMORE, MD 21204**Current Mailing Address:**110 WEST ROAD, SUITE 360  
BALTIMORE, MD 21204 US**FEI Number:** 86-1131936**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CEO  
Name TRIANTAFILOU, CONSTANTINE M  
Address 110 W RD, STE 360  
City-State-Zip: BALTIMORE MD 21204

Title CFAO  
Name SEGALL, TAMARA D  
Address 110 W RD, STE 360  
City-State-Zip: BALTIMORE MD 21204

Title CHMN  
Name HINKATY, CHARLES J  
Address 110 W RD, STE 360  
City-State-Zip: BALTIMORE MD 21204

Title TREA  
Name MOYAR, BERT W  
Address 110 W RD, STE 360  
City-State-Zip: BALTIMORE MD 21204

Title SECR  
Name RADAKOVICH, STEVE  
Address 110 W RD, STE 360  
City-State-Zip: BALTIMORE MD 21204

Title CHAIRMAN  
Name BOULANGER, JASMINA T  
Address 110 WEST ROAD, SUITE 360  
City-State-Zip: BALTIMORE MD 21204

Title TREASURER, DIRECTOR  
Name ZGOURIDES, DIMITRI  
Address 110 WEST ROAD, SUITE 360  
City-State-Zip: BALTIMORE MD 21204

Title DIRECTOR  
Name ELLIAS, FR. MICHAEL  
Address 110 WEST ROAD, SUITE 360  
City-State-Zip: BALTIMORE MD 21204

**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: STEVE RADAKOVICH****SECRETARY****04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SUEHS, THOMAS  
Address 110 WEST ROAD, SUITE 360  
City-State-Zip: BALTIMORE MD 21204

Title DIRECTOR  
Name MOSSAIDES, MARIA  
Address 110 WEST ROAD, SUITE 360  
City-State-Zip: BALTIMORE MD 21204

Title DIRECTOR  
Name MACHASKEE, ALEX  
Address 110 WEST ROAD, SUITE 360  
City-State-Zip: BALTIMORE MD 21204