Entity	Name: HC	WARD HUG	GHES MEDICAL	INSTITUTE	CORPORATION

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

4000 JONES BRIDGE ROAD CHEVY CHASE. MD 20815

DOCUMENT# F0900003460

Current Mailing Address:

4000 JONES BRIDGE ROAD CHEVY CHASE, MD 20815 US

FEI Number: 59-0735717

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

Officer/Director Detail :

	Title	CONTROLLER	Title	TRUSTEE, CHAIRMAN		
	Name	MARCUS, MONIQUE L	Name	SCHMOKE, KURT L ESQ.		
	Address	4000 JONES BRIDGE RD	Address	4000 JONES BRIDGE ROAD		
	City-State-Zip:	CHEVY CHASE MD 20815	City-State-Zip:	CHEVY CHASE MD 20815		
	Title Name Address City-State-Zip:	VICE PRESIDENT, CFO, SECRETARY, GENERAL COUNSEL HENNING, HEIDI E ESQ. 4000 JONES BRIDGE ROAD CHEVY CHASE MD 20815	Title Name Address City-State-Zip:	VP AND EXEC. DIRECTOR VALE, RON PH.D. 4000 JONES BRIDGE ROAD CHEVY CHASE MD 20815		
	Title Name Address City-State-Zip:	DIRECTOR & ASST TREASURER PLOTNICK, SUSAN S 4000 JONES BRIDGE ROAD CHEVY CHASE MD 20815	Title Name Address City-State-Zip:	TRUSTEE BARSHEFSKY, CHARLENE ESQ. 4000 JONES BRIDGE ROAD CHEVY CHASE MD 20815		
	Title Name Address City-State-Zip:	TRUSTEE LUMMIS, FRED R 4000 JONES BRIDGE ROAD CHEVY CHASE MD 20815	Title Name Address City-State-Zip:	TRUSTEE NURSE, PAUL M 4000 JONES BRIDGE ROAD CHEVY CHASE MD 20815		
		C		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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MONIQUE L. MARCUS

CONTROLLER

04/19/2021

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	TRUSTEE	Title	TRUSTEE
Name	RICHARD, ALISON F PH.D.	Name	ROSE, CLAYTON S PH.D.
Address	4000 JONES BRIDGE ROAD	Address	4000 JONES BRIDGE ROAD
City-State-Zip:	CHEVY CHASE MD 20815	City-State-Zip:	CHEVY CHASE MD 20815
Title	TRUSTEE	Title	TRUSTEE
Name	SPAR, DEBORA L	Name	TUTWILER, MARGARET D
Address	4000 JONES BRIDGE ROAD	Address	4000 JONES BRIDGE ROAD
City-State-Zip:	CHEVY CHASE MD 20815	City-State-Zip:	CHEVY CHASE MD 20815
Title	CHIEF OF STRATEGIC INITIATIVES	Title	TRUSTEE
Name	JULIUS, DAVID PHD	Name	GOLDSTEIN, JOSEPH L
Address	4000 JONES BRIDGE ROAD	Address	4000 JONES BRIDGE ROAD
City-State-Zip:	CHEVY CHASE MD 20815	City-State-Zip:	CHEVY CHASE MD 20815
Title	TRUSTEE		
Name	LAVIZZO-MOUREY , RISA		

Address4000 JONES BRIDGE ROADCity-State-Zip:CHEVY CHASE MD 20815