

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000136

FILED
May 10, 2009
Secretary of State

Entity Name: GENETICS POLICY INSTITUTE, INC.

Current Principal Place of Business:

1900 L STREET NW - STE 215
WASHINGTON, DC 20036

New Principal Place of Business:

1900 L STREET NW - STE 215
WASHINGTON, DC 20036

Current Mailing Address:

11924 FOREST HILL BLVD
22-290
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 20-5509308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST.
STE. 1
TALLAHASSEE, FL 323011283 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: SIEGEL, BERNARD
Address: 8829 VIA GRANDE EAST
City-St-Zip: WELLINGTON, FL 33411

Title: S () Delete
Name: SIEGEL, SHERYL J
Address: 8829 VIA GRANDE EAST
City-St-Zip: WELLINGTON, FL 33411

Title: DT () Delete
Name: GROSSMAN, RICHARD S
Address: 405 WESTHAM PKWY
City-St-Zip: RICHMOND, VA 23229

Title: D () Delete
Name: DITTMAN, RALPH S
Address: 5538 DOLIVER DR
City-St-Zip: HOUSTON, TX 77056

Title: D () Delete
Name: LUDWIG, PETER S
Address: 7 WORLD TRADE CENTER
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: CHOATE, TIMOTHY
Address: 2550 HUNTINGTON AVENUE, #310
City-St-Zip: ALEXANDRIA, VA 22303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: GROSSBERG, RICHARD S
Address: 405 WESTHAM PKWY
City-St-Zip: RICHMOND, VA 23229

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BERNARD SIEGEL

PC

05/10/2009

Electronic Signature of Signing Officer or Director

_____ Date