2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33552

FILED Jan 10, 2007 Secretary of State

Entity Name: ORPHAN FOUNDATION OF AMERICA INCOPORATED

New Principal Place of Business: Current Principal Place of Business: 21351 GENTRY DRIVE **UNIT 130** STERLING, VA 20166 **New Mailing Address: Current Mailing Address:** 21351 GENTRY DRIVE **UNIT 130** STERLING, VA 20166 FEI Number: 52-1238437 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition JACSON, PHILIP JACSON, PHILIP Name: Name: RT 1 #269 Address: 9911 MAPLE LEAF DR Address: City-St-Zip: CHARLESTOWN, WV 25414 City-St-Zip: GAITHERSBURG, MD 20879 Title: Title: (X) Change () Addition () Delete MCCAFFREY, EILEEN Name: MCCAFFREY, EILEEN Name: Address: 12020-D NORTH SHORE DR Address: 11585 RED LEAF COURT City-St-Zip: RESTON, VA 20190 City-St-Zip: RESTON, VA 20191 US () Delete Title: Title: (X) Change () Addition EURE, MARY STRACUZZI, GINA Name: Name: SALLIE MAE Address: Address: 7950 ARDEN CT City-St-Zip: RESTON, VA 20101 City-St-Zip: DUNN LORING, VA 22027 US Title: () Delete Title: (X) Change () Addition Name: BERNHART, GORDON Name: BERNHARDT, GORDON 7309 ARLINGTON BLVD 7309 ARLINGTON BLVD Address: Address: City-St-Zip: FALLS CHURCH, VA 22042 City-St-Zip: FALLS CHURCH, VA 22042 Title: () Delete Title: () Change (X) Addition GOSSWEILER, BOB PH.D Name: Name: **USAL HUMB24** Address: Address: MOBILE, AL 36688 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIP JACKSON O 01/10/2007