

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002698

Entity Name: EPILEPSY FOUNDATION OF AMERICA, INC.**Current Principal Place of Business:**3540 CRAIN HIGHWAY
SUITE 675
BOWIE, MD 20716**Current Mailing Address:**1395 PICCARD DRIVE
SUITE 180
ROCKVILLE, MD 20850 US**FEI Number:** 52-0856660**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCorp SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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	CFO
Name	ROSNER, RAHEL
Address	3540 CRAIN HIGHWAY SUITE 675
City-State-Zip:	BOWIE MD 20716

Title	SECRETARY
Name	HUDSON, CYNTHIA
Address	3540 CRAIN HIGHWAY SUITE 675
City-State-Zip:	BOWIE MD 20716

Title	TREASURER
Name	SMITH, ROBERT
Address	3540 CRAIN HIGHWAY SUITE 675
City-State-Zip:	BOWIE MD 20716

Title	CEO
Name	THRALL, LAURA
Address	3540 CRAIN HIGHWAY SUITE 675
City-State-Zip:	BOWIE MD 20716

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: RAHEL ROSNER

CFO

04/01/2022

Electronic Signature of Signing Officer/Director Detail_____
Date