2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2017
Secretary of State
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Entity Name: COLON CANCER ALLIANCE, INC.

Current Principal Place of Business:

1025 VERMONT AVE NW
SUITE 1066
WASHINGTON, DC 20005

Current Mailing Address:

1025 VERMONT AVE NW
SUITE 1066
WASHINGTON, DC 20005 US

FEI Number: 86-0947831

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD.
115 NORTH CALHOUN ST.
SUITE 4
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: ANDREW HACKETT 04/24/2017

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY	Title	CO-FOUNDER, DIRECTOR
Name	ZAHABY, MICHAEL	Name	LEWIS, KEVIN
Address	1025 VERMONT AVE NW SUITE 1066	Address	185 ASYLUM STREET SUITE 2400
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip:	HARTFORD CT 06103
Title	DIRECTOR	Title	CHAIRMAN, DIRECTOR
Name	DALY, JOHN	Name	FRICK, JOSEPH
Address	2005 MARKET STREET SUITE 3300	Address	2005 MARKET STREET SUITE 3300
City-State-Zip:	PHILADELPHIA PA 19103	City-State-Zip:	PHILADELPHIA PA 19103
Title	DIRECTOR	Title	DIRECTOR
Name	RETSKY, MICHAEL	Name	TOLK, JERRY
Address	1025 VERMONT AVE NW SUITE 1066	Address	229 PEACHTREE STREET, NE SUITE 1600
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip:	ATLANTA GA 30303
Title	DIRECTOR	Title	TREASURER
Name	VALVO, CARMEN MARC	Name	DEAN, HEATHER
Address	1025 VERMONT AVE NW SUITE 1066	Address	1025 VERMONT AVE SUITE 1066
City-State-Zip:	WASHINGTON DC 20005	City-State-Zip:	WASHINGTON DC 20005

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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: MICHAEL SAPIENZA CEO 04/24/2017

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SHAPIRO, KITT
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	DIRECTOR
Name	CLOWES, JULIE
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	DIRECTOR
Name	KNELL, KATHERINE
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	DIRECTOR
Name	FRASER, THERESA
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	DIRECTOR
Name	DE MARCHI TREVISAN, RICCARDO
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	CHIEF OPERATION OFFICER
Name	SHEAHAN, NICOLE
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	VICE CHAIR, DIRECTOR
Name	BACKUS, JOHN
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	DIRECTOR
Name	SAPIENZA, FRANK L
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	DIRECTOR
Name	JACKSON, PATRICK MD
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	DIRECTOR
Name	LELECK, PAUL
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005

Title	CEO
Name	SAPIENZA, MICHAEL
Address	1025 VERMONT AVE NW SUITE 1066
City-State-Zip:	WASHINGTON DC 20005