## 2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005096

Entity Name: UNITED STATES ANTI-DOPING AGENCY, INCORPORATED

FILED
Apr 05, 2019
Secretary of State
9667668577CC

## **Current Principal Place of Business:**

5555 TECH CENTER DRIVE SUITE #200

COLORADO SPRINGS, CO 80919

## **Current Mailing Address:**

5555 TECH CENTER DRIVE SUITE #200 COLORADO SPRINGS, CO 80919

FEI Number: 84-1541903 Certificate of Status Desired: No

## 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

BOD

Officer/Director Detail:

Title CHAIR Title 7

Name MOSES, EDWIN C Name SWENSON, CARL

Address 5555 TECH CENTER DRIVE #200 Address 5555 TECH CENTER DRIVE #200
City-State-Zip: COLORADO SPRINGS CO 80919 City-State-Zip: COLORADO SPRINGS CO 80919

Title CEO Title VICE CHAIR

Name TYGART, TRAVIS Name CLARK, RICHARD V DR.

Address 5555 TECH CENTER DRIVE #200 Address 5555 TECH CENTER DRIVE

y-State-Zip: COLORADO SPRINGS CO 80919

City-State-Zip: COLORADO SPRINGS CO 80919 City-State-Zip: COLORADO SPRINGS CO 80919

Title TREASURER Title

Name BLAUWET, CHERI A DR. Name GAMBRIL, DON L

Address 5555 TECH CENTER DRIVE SUITE #200 Address 5555 TECH CENTER DRIVE

SUITE #200

City-State-Zip: COLORADO SPRINGS CO 80919 City-State-Zip: COLORADO SPRINGS CO 80919

Title SECRETARY Title DIRECTOR

Name TAYLOR, MARCIA L Name BRIGGS, SANDRA M

Address 5555 TECH CENTER DRIVE Address 5555 TECH CENTER DRIVE

SUITE #200 Address 5555 TECH CENT

City-State-Zip: COLORADO SPRINGS CO 80919

City-State-Zip: COLORADO SPRINGS CO 80919

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: SANDRA M BRIGGS DIRECTOR 04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date

Date