

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005324

Entity Name: BRIGHT PINK NFP, INC.**Current Principal Place of Business:**670 N. CLARK ST.
SUITE 2
CHICAGO, IL 60654**Current Mailing Address:**670 N. CLARK ST.
SUITE 2
CHICAGO, IL 60654**FEI Number:** 51-0619889**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN STREET
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:** ANN MARIE CUMMINS

04/23/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MALKOFF, KURT PH.D
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

Title DIRECTOR AND SECRETARY
Name TONEY, JAMES
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

Title TREASURER
Name ARONSON, TARYN
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

Title DIRECTOR
Name AVNER, LINDSAY
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

Title CEO
Name THIEDE, KATIE
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

Title VP OF FINANCE AND OPERATIONS
Name DAWODU, TRACI
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

Title DIRECTOR
Name KAPLAN, GREGG
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

Title DIRECTOR
Name FOUTTY, JANET
Address 670 N. CLARK ST.
SUITE 2
City-State-Zip: CHICAGO IL 60654

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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: KATIE THIEDE

CEO

04/23/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MONTGOMERY, TARA
Address 670 N. CLARK ST.
 SUITE 2
City-State-Zip: CHICAGO IL 60654

Title DIRECTOR
Name BEISER, KATHY
Address 670 N. CLARK ST.
 SUITE 2
City-State-Zip: CHICAGO IL 60654

Title DIRECTOR
Name WEXLER, STACEY
Address 670 N. CLARK ST.
 SUITE 2
City-State-Zip: CHICAGO IL 60654