

2025 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001439

Entity Name: SICKLE CELL DISEASE ASSOCIATION OF AMERICA, INC.**Current Principal Place of Business:**7240 PARKWAY DRIVE
SUITE 180
HANOVER, MD 21076**Current Mailing Address:**7240 PARKWAY DRIVE
SUITE 180
HANOVER, MD 21076 US**FEI Number:** 23-7175985**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 DIRECTOR
Name STATEN , BOBBY III
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title DIRECTOR
Name MBA, CHRISTOPHER HOLLINS,
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title DIRECTOR
Name PHARMAD, MHA, MBA, CRYSTAL A.
RILEY,
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title DIRECTOR
Name DONNELL IVY, EDWARD DR.
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title DIRECTOR
Name CPA, MBA, CISA, CIA, KATHERINE
NAPIER, DR.
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title DIRECTOR
Name FLOWERS, ED W.
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title DIRECTOR
Name SMITH-WHITLEY MD, KIM
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title DIRECTOR
Name PHD, MPH, MELISSA CREARY,
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

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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: REGINALD P. HART JR.**CHIEF FINANCIAL
OFFICER****01/10/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name , ED.D, MONICA MITCHELL
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title CFO
Name HART, REGINALD P. JR.
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title PRESIDENT
Name HARTFIELD, REGINA
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076

Title DIRECTOR
Name MPH, TALANA HILL-HUGHES,
Address 7240 PARKWAY DRIVE
SUITE 180
City-State-Zip: HANOVER MD 21076