

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07026

Entity Name: THE NATIONAL OSTEOPOROSIS FOUNDATION, INC.**Current Principal Place of Business:**251 18TH STREET SOUTH
SUITE 630
ARLINGTON, VA 22202**Current Mailing Address:**251 18TH STREET SOUTH
SUITE 630
ARLINGTON, VA 22202 US**FEI Number:** 36-3350532**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	CEO
Name	THOMPSON, ELIZABETH
Address	251 18TH STREET S SUITE 630
City-State-Zip:	ARLINGTON VA 22202

Title	PRESIDENT AND INTERIM CHAIRMAN
Name	SUSAN, GREENSPAN DR.
Address	251 18TH ST SOUTH SUITE 630
City-State-Zip:	ARLINGTON VA 22202

Title	TRUSTEE
Name	INSOGNA, KARL DR.
Address	251 18TH ST SOUTH SUITE 630
City-State-Zip:	ARLINGTON VA 22202

Title	TRUSTEE
Name	KIM, DAVID L
Address	251 18TH ST SOUTH SUITE 630
City-State-Zip:	ARLINGTON VA 22202

Title	TRUSTEE
Name	LAPPE, JOAN M PHD
Address	251 18TH ST SOUTH SUITE 630
City-State-Zip:	ARLINGTON VA 22202

Title	TRUSTEE
Name	LAWRENCE, C. BERDON
Address	251 18TH ST SOUTH SUITE 630
City-State-Zip:	ARLINGTON VA 22202

Title	TRUSTEE
Name	LE BOFF, MERYL DR.
Address	251 18TH ST SOUTH SUITE 630
City-State-Zip:	ARLINGTON VA 22202

Title	TRUSTEE
Name	SIRIS, ETHEL DR.
Address	251 18TH ST SOUTH SUITE 630
City-State-Zip:	ARLINGTON VA 22202

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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: ELIZABETH THOMPSON

CEO

06/12/2019

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title SECRETARY, TREASURER
Name GRUFFERMAN, BARBARA H.
Address 251 18TH ST SOUTH
SUITE 630
City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE
Name CHILDS, BLAIR
Address 251 18TH ST SOUTH
SUITE 630 SUITE 625
City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE
Name SINGER, ANDREA DR.
Address 251 18TH ST SOUTH
SUITE 630 3PHC
City-State-Zip: ARLINGTON VA 22202

Title DIRECTOR
Name GILL, CLAIRE
Address 251 18TH STREET SOUTH
SUITE 630
City-State-Zip: ARLINGTON VA 22202

Title VP
Name MICHAEL, LEWIECKI
Address 251 18TH ST SOUTH
SUITE 630
City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE
Name OATES, MARY DR.
Address 251 18TH ST SOUTH
SUITE 630
City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE
Name BUKATA, SUSAN DR.
Address 251 18TH ST SOUTH
SUITE 630 SUITE 3142
City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE
Name MICHAEL, COOK JD
Address 251 18TH ST SOUTH
SUITE 630 SUITE 200
City-State-Zip: ARLINGTON VA 22202

Title COO, CFO
Name ERIKSON, DEBRA
Address 251 18TH STREET SOUTH
SUITE 630
City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE
Name KOINIS, THOMAS DR.
Address 251 18TH ST SOUTH
SUITE 630
City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE
Name LYLES, KENNETH DR.
Address 251 18TH ST SOUTH
SUITE 630
City-State-Zip: ARLINGTON VA 22202

Title TRUSTEE
Name SINGER, FREDERICK DR.
Address 251 18TH ST SOUTH
SUITE 630
City-State-Zip: ARLINGTON VA 22202