

2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16555

Entity Name: THE FOUNDATION FOR AIDS RESEARCH, INCORPORATED**Current Principal Place of Business:**120 WALL STREET, 13TH FLOOR
NEW YORK, NY 10005**Current Mailing Address:**C/O WINFIELD SUMMIT & ASSOCIATES
11786 COORS GOLD LANE
NORTHRIDGE, CA 91326 US**FEI Number:** 13-3163817**Certificate of Status Desired:** Yes**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_____
Date**Officer/Director Detail :**

Title S
Name SILVERMAN, MERVYN F
Address 120 WALL STREET, 13TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title AT
Name JENSEN, BRADLEY
Address 120 WALL STREET 13TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title VC
Name MATSON, PATRICIA J
Address 120 WALL ST 13TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title TRUSTEE
Name ANDELSON, ARLEN H ESQ
Address 120 WALL ST
13TH FL
City-State-Zip: NY NY 10005

Title COB
Name COLE, KENNETH
Address 120 WALL ST
13TH FL
City-State-Zip: NY NY 10005

Title FC
Name KRIM, MATHILDE PHD
Address 120 WALL STREET 13TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title VC, /TREASURER
Name SIMONS, JOHN C
Address 120 WALL STREET, 13TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title TRUSTEE
Name BELAFONTE, HARRY
Address 120 WALL ST
13TH FL
City-State-Zip: NY NY 10005

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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: BRADLEY JENSENASSISTANT
TREASURER/CFO

01/25/2016

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title TRUSTEE
Name BOHNETT, DAVID
Address 120 WALL ST
13TH FL
City-State-Zip: NY NY 10005

Title TRUSTEE
Name CANNO, JONATHAN
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Title TRUSTEE
Name EISNER, JANE B
Address 120 WALL ST
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Title TRUSTEE
Name HOFMANN, REGAN
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Title TRUSTEE
Name MCNEILL, MICHELE V PHARM.D.
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Title TRUSTEE
Name RACHOFSKY, CINDY D.
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Title TRUSTEE
Name ROEDY, BILL
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Title TRUSTEE
Name SCHWARTZ, ALAN D.
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Title TRUSTEE
Name WENDLE, KEVIN
Address 120 WALL ST
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Title ASSISTANT SECRETARY
Name JOHNSTON, ROWENA

Title TRUSTEE
Name BRAUN, ZEV
Address 120 WALL ST
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Title TRUSTEE
Name CAPOCCIA, DONALD
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Title TRUSTEE
Name GREENAWALT, RYAN
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Title TRUSTEE
Name KLINGENSMITH, MICHAEL J
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Title TRUSTEE
Name MCCLATCHY, KEVIN
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Title TRUSTEE
Name ROBERTI, VINCENT A.
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Title TRUSTEE
Name SCHINAZI, RAYMOND F. PHD, HON.
DSC
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Title TRUSTEE
Name TAYLOR, DIANA L
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Title ASSISTANT TREASURER
Name DONNLLEY, EDWARD
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Title ASSISTANT SECRETARY
Name LOGAN, JOHN ESQ.

Address 120 WALL ST
13TH FL
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Title TRUSTEE
Name CHAVEZ, R. MARTIN PH.D.

Address 120 WALL ST
13TH FL
City-State-Zip: NY NY 10005

Title CEO
Name FROST, KEVIN ROBERT
Address 120 WALL STREET, 13TH FLOOR
City-State-Zip: NEW YORK NY 10005

Address 120 WALL ST
13TH FL
City-State-Zip: NY NY 10005

Title TRUSTEE
Name MILSTEIN, EDWARD L

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