2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2016
Secretary of State
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Entity Name: THE CHILDREN'S ORGAN TRANSPLANT ASSOCIATION, INC.

Current Principal Place of Business:

2501 COTA DRIVE
BLOOMINGTON, IN 47403

Current Mailing Address:

2501 COTA DRIVE
BLOOMINGTON, IN 47403

FEI Number: 35-1674365

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANATION, FL 33324 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	T
Name	HANNAH, BO
Address	677 MEADOWVIEW LANE
City-State-Zip:	GREENWOOD IN 46142

Title	S
Name	MCNEELY, KATHLEEN T
Address	5319 WESTFALL COURT
City-State-Zip:	BLOOMINGTON IN 47404

Title	CFO
Name	FULKERSON, LISA
Address	2501 COTA AVE
City-State-Zip:	BLOOMINGTON IN 47403

Title	BOARD MEMBER
Name	DEBRUICKER, TIM
Address	885 S WOODCREST DR
City-State-Zip:	BLOOMINGTON IN 47401

Title	PCEO
Name	LOFGREN, RICHARD E
Address	2501 COTA DRIVE
City-State-Zip:	BLOOMINGTON IN 47403

Title	C
Name	PAGANELLI, F. ANTHONY
Address	ONE INDIANA SQUARE, SUITE 3500
City-State-Zip:	INDIANAPOLIS IN 46204

Title	BOARD MEMBER
Name	AUKERMAN, ROB
Address	2500 INNOVATION WAY
City-State-Zip:	GREENFIELD IN 46140

Title	BOARD MEMBER
Name	DROWNE, MATTHEW
Address	2561 E TAXIDEA WAY
City-State-Zip:	PHOENIZ AZ 85048

Continues on page 2

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: LISA FULKERSON CFO 01/26/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	BOARD MEMBER
Name	GANTON, SCOTT
Address	3004 GARDNER RD
City-State-Zip:	PARMA MI 49269

Title	BOARD MEMBER
Name	HUFFMAN, CRAIG
Address	201 W SYCAMORE ST
City-State-Zip:	KOKOMA IN 46901

Title	BOARD MEMBER
Name	ORMSTEDT, DAVID
Address	2905 S OLCOTT BLVD
City-State-Zip:	BLOOMINGTON IN 47404

Title	VC
Name	GILROY, JAMES
Address	1400 W RAYMOND STREET
City-State-Zip:	INDIANAPOLIS IN 46285

Title	BOARD MEMBER
Name	KNAPP, SHARON
Address	4646 ALLEN DRIVE
City-State-Zip:	CARMEL IN 46033

Title	BOARD MEMBER
Name	TOOLEY, OMER JR.
Address	CAMP ATTERBURY PO BOX 5000
City-State-Zip:	EDINBURG IN 46124