



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Non-Profit
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000149887

2. Name of Corporation The Johns Hopkins University

3. State of Incorporation

State: MD

4. Corporate Address in Rhode Island

No. and Street: NONE

City or Town: BALTIMORE MARYLAND State: RI Zip: 21218 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO ORGANIZE AND EDUCATIONAL ORGANIZATION FOR THE PROMOTION OF
EDUCATION.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	RONALD J. DANIELS M.D.	3400 NORTH CHALRES STREET, 242 GARLAND HALL BALTIMORE, MD 21218 USA
SECRETARY	MAUREEN S MARSH	3400 N CHARLES STREET BALTIMORE, MD 21218 USA
VICE PRESIDENT	DANIEL G. ENNIS	3400 NORTH CHARLES ST BALTIMORE, MD 21218 USA
DIRECTOR	JANIE E. BAILEY	125 EAST 35TH STREET

		NEW YORK, NY 10152 USA
DIRECTOR	MICHAEL D. HANKIN	901 S. BOND STREET, SUITE 400 BALTIMORE, MD 21231 USA
DIRECTOR	JEFFREY H. ARONSON	375 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10152 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 15 Day of May, 2015 at 10:08:32 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By DANIEL G. ENNIS
Signature of Authorized Person

Form No. 631
Revised 09/07

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