



**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: 2016

1. Corporate ID No. 000796325

2. Name of Corporation Asthma and Allergy Foundation of America

3. State of Incorporation

State: NY

4. Corporate Address in Rhode Island

No. and Street: 222 JEFFERSON BOULEVARD
SUITE 200

City or Town: WARWICK

State: RI Zip: 02888 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 8201 CORPORATE DRIVE, SUITE 1000

City or Town: LANDOVER State: MD Zip: 20785 Country:

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

DEDICATED TO IMPROVING THE QUALITY OF LIFE FOR PEOPLE WITH ASTHMA AND ALLERGIC DISEASES

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	HEIDI BAYER	8201 CORPORATE DRIVE, SUITE 1000 LANDOVER, MD 20785 USA
TREASURER	JAMES FLOOD	8201 CORPORATE DRIVE, SUITE 1000 LANDOVER, MD 20785 USA
SECRETARY	DAVID STUKUS	8201 CORPORATE DRIVE, SUITE 1000 LANDOVER, MD 20785 USA

VICE PRESIDENT	LYNN HANNESSIAN	8201 CORPORATE DRIVE, SUITE 1000 LANDOVER, MD 20785 USA
DIRECTOR	STEVE CHAMIEDES	8201 CORPORATE DRIVE, SUITE 1000 LANDOVER, MD 20785 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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI
02888

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

Signed this 13 Day of June, 2016 at 8:54:21 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 CARY SENNETT
Signature of Authorized Person

Form No. 631
Revised 09/07

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