

State of Rhode Island 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: February 1 - May 1

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 - ENTER THE CURRENT FILING YEAR 2023: 2023

- 1. Corporate ID No. 000024610
- 2. Name of Corporation MUSCULAR DYSTROPHY ASSOCIATION, INC.
- 3. State of Incorporation

State: NY

NAICS CODE

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification <u>click here.</u>

NAICS Code

813212

4. Principal Office Address

No. and Street: 161 NORTH CLARK STREET,

SUITE 3550

City or Town: CHICAGO State: IL Zip: 60601 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

TO FOSTER AND PROMOTE THE CURE AND ALLEVIATION OF THE CONDITIONS OF PERSONS SUFFERING FROM DISEASES OF MUSCLE AND/OR NERVE

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address City or Town State Zin Code Country
PRESIDENT	First, Middle, Last, Suffix DONALD S, WOOD	Address, City or Town, State, Zip Code, Country 161 NORTH CLARK STREET, SUITE 3550
TREASURER	MICHAEL J. KENNEDY	161 NORTH CLARK STREET, SUITE 3550
CHAIRMAN	STEVE FARELLA	161 NORTH CLARK STREET, SUITE 3550
CHIEF OF STAFF	KRISTINE WELKER	161 NORTH CLARK STREET, SUITE 3550
VICE CHAIRMAN	BRAD HENRY	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
SECRETARY	HENRY LAHMAN	161 N. CLARK, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	JOHN HOWELL	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	NANCY KINDELAN	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	LOU KUNKEL	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	ELIZABETH MCNALLY	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	ROB PIPIA	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	MATT PLUMMER	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	CHRIS ROSA	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	CHARLES SCHOOR	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	MARK SMITH	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	GENE WILLIAMS	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	VICTOR WRIGHT	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	LILLIAN WU	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	ANJAN ARALIHALLI	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	JOHN COSTANTINO	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	BEN CUMBO III.	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	DAN FRIES	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA
DIRECTOR	AKUR GHIA	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA

DIRECTOR	JENNIFER GOTTLIEB	161 NORTH CLARK STREET, SUITE 3550 CHICAGO, IL 60601 USA

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

 $\underline{\text{CORPORATE CREATIONS NETWORK INC.}} \ \underline{\text{10 DORRANCE STREET \#700}} \ \underline{\text{PROVIDENCE}} \ , \ \underline{\text{RI}} \\ \underline{\text{02903}}$

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

Signed this 5 Day of July, 2023 at 12:19:51 PM 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 DON WOOD

Signature of Authorized Person

Form No. 631 Revised 09/07

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