

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29513

Entity Name: BRIGHTFOCUS FOUNDATION, INC.**Current Principal Place of Business:**22512 GATEWAY CENTER DRIVE
CLARKSBURG, MD 20871**Current Mailing Address:**22512 GATEWAY CENTER DRIVE
CLARKSBURG, MD 20871 US**FEI Number:** 23-7337229**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, 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 VICE CHAIRPERSON/DIRECTOR
Name BARNETT, MICHAEL H ESQ.
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title CHAIRPERSON/DIRECTOR
Name FRISCONE, GRACE
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title TREASURER/DIRECTOR
Name RAYMOND, NICHOLAS W
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title SECRETARY/DIRECTOR
Name RODGVILLE, SCOTT CPA
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title VICE PRESIDENT - FINANCE &
ADMINISTRATION
Name MARKS, DAVID CPA, CMA
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title PRESIDENT/CHIEF EXECUTIVE
OFFICER
Name HALLER, STACY
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title DIRECTOR
Name KINOSHITA, JUNE
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title DIRECTOR
Name LEE, JUDITH PHD
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

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: DAVID F. MARKSVP FINANCE &
ADMINISTRATION

02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MARCELLO, DIANE
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title DIRECTOR
Name REGAN, BRIAN K PHD
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title VP, - DEVELOPMENT
Name CALLISON, DONNA
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title VP, - PUBLIC AFFAIRS
Name BUCKLEY, MICHAEL
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title DIRECTOR
Name POWNALL, HENRY PHD
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title DIRECTOR
Name SCHOONVELD, ELTJO R
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871

Title VP, - SCIENTIFIC AFFAIRS
Name EAKIN, GUY PHD
Address 22512 GATEWAY CENTER DRIVE
City-State-Zip: CLARKSBURG MD 20871