No. C 191335		Due no later than Jun 30, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			BARBARA FAWCETT 4696 OVERLAND RD STE 234 BOISE ID 83705-2864 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. NATIONAL HEMOPHILIA FOUNDATION (THE) KARINA LOPEZ 7 PENN PLAZA 1204 NEW YORK NY 10001 USA		The second secon				
				3. <u>New</u> Register				
4. Corporations: Enter N	ames and Busin	ess Addresses of F	resident, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
VICE PRESIDENT TREASURER PRESIDENT	JORGE DE L JAMES HEEI BRIAN ANDF	₹	7 PENN PLAZA SUITE 1204 7 PENN PLAZA SUITE 1204 7 PENN PLAZA SUITE 1204	NEW YORK NEW YORK NEW YORK	NY NY NY	USA USA USA	10001 10001 10001	
SECRETARY	KRISTIE K.	OSTASH	7 PENN PLAZA SUITE 1204	NEW YORK	NY	USA	10001	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
NY C 191335		Signature: Jordana Zeger		Date: 07/24	Date: 07/24/2017			
		Name (type or print): Jordana Zeger		Title: Chief	Title: Chief Operating Officer			
Processed 07/24/2017		* Electronically pr	ovided signatures are accepted as original s	signatures.				