

1.) CORPORATION NAME:

**AMERICAN INTELLECTUAL PROPERTY LAW
EDUCATION FOUNDATION**

DUE DATE: **1/31/2012**

SCC ID NO: **05518360**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 241 18TH ST S
STE 700

CITY/ST/ZIP: ARLINGTON, VA 22202

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	PHILIP HAMPTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PAST PRESIDENT		
ADDRESS:	1825 EYE ST NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20006		

NAME:	DAVID HIGHET	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	BECTON DICKINSON 1 BECTON DRIVE		
CITY/ST/ZIP/CO:	FRANKLIN LAKES, NJ 07417		

NAME:	JO ANNA M ESTY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/S		
ADDRESS:	2049 CENTURY PARK E STE 2100		
CITY/ST/ZIP/CO:	LOS ANGELES, CA 90067		

NAME:	DIALLO CRENSHAW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2100 PENNSYLVANIA AVE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20037		

NAME:	Susan Mcganan	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	AT & T		
CITY/ST/ZIP/CO:	DALLAS, VA 75202		

NAME:	AUTONDRIA MINOR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	SCHMEISER OLSEN & WATTS		
CITY/ST/ZIP/CO:	LATHAM, NY 12110		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DOUGLAS NORMAN DIRECTOR ELI LILLY 839 S. DELEWARE ST INDIANAPOLIS, IN 46225	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STASIA L ODGEN DIRECTOR BAXTER HEALTHCARE CORP 1 BAXTER PARKWAY DEEFIELD, IL 60015	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDREA RYAN DIRECTOR NORTH ADAMS NORTH ADAMS, MA 01247	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JULE SIGAL DIRECTOR MICROSOFT REDMOND, WA 98052	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WAYNE SOBON DIRECTOR RAMBUS INC 1050 ENTERPRICE DRIVE SUITE 700 SUNNYVALE , CA 94089	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHERINE SPELMAN DIRECTOR COBALT 918 PARKER ST, BLDG A21 BERKLEY, CA 94710	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARC COHEN DIRECTOR KIRKLAND & ELLIS LLP 777 S FIGUERAA ST LOS ANGELES, CA 90017	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GUY DONATIELLO DIRECTOR ENDO PHARMACEUTICALS 177 CANTIGUE ROCK ROAD WESTBURY, NY 11590	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARL HORTON DIRECTOR GENERAL ELECTRIC 3135 EASTON TURNPIKE W3E FAIRFIELD, CT 06825	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE JORDAN III DIRECTOR FULBRIGHT & JAWORSKI LLP 1301 MCKINNEY ST SUITE 5100 HOUSTON, TX 77010	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DENISE KETTELBERGER DIRECTOR 2200 WEST FARGO CENTER 90 SOUTH 7TH ST MINNEAPOLIS, MN 55402	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHY KOWALCHYK DIRECTOR 3200 IDS CENTER 80 SOUTH 8TH STREET MINNEAPOLIS, MN 54402	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NICHOLAS LEACH DIRECTOR CHEVRON 6001 BOLLINGER CANYON RD SAN RAMON, CA 94583	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ DIALLO CRENSHAW SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DIALLO CRENSHAW, TREASURER PRINTED NAME AND CORPORATE TITLE	5/31/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			