

1.) CORPORATION NAME:

LUPUS FOUNDATION OF AMERICA, INC.

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1048513**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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GLEN ALLEN, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2000 L STREET NW
SUITE 410

CITY/ST/ZIP: WASHINGTON, DC 20036

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:	SANDRA CLAIRE RAYMOND	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	P/CEO		
ADDRESS:	2000 L STREET NW SUITE 710		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20036		

NAME:	SEUNG-AE CHUNG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	2000 L STREET, NW, SUITE 410		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20036		

NAME:	PETER M SCHWAB	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CHAIR		
ADDRESS:	233 SOUTH WACKER DR SEARS TOWER STE 5300		
CITY/ST/ZIP/CO:	CHICAGO, IL 60606		

NAME:	CINDY CONEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PAST CHAIR		
ADDRESS:	4406 CULBREATH AVE		
CITY/ST/ZIP/CO:	TAMPA, FL 33609		

NAME:	TONI FREEMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2414 1ST AVENUE, UNIT 701		
CITY/ST/ZIP/CO:	SEATTLE, WA 98121		

NAME:	MERRILYN J. KOSIER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	200 EAST RANDOLPH DRIVE, 2900		
CITY/ST/ZIP/CO:	CHICAGO, IL 60606		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANINE ALLEN DIRECTOR 16 SUNSET COVE NEWPORT BEACH, CA 92657	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JUDY BARLIN DIRECTOR 9844 SW 124 TERRACE MIAMI, FL 33176	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	R. THOMAS DAWE DIRECTOR 317 COMMERCIAL N.E. ALBUQUERQUE, NM 87102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KAREN B EVANS DIRECTOR 6614 CROSS COUNTRY BLVD BALTIMORE, MD 21215	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CONRAD GEHRMANN TREASURER 701 PIKE STREET, SUITE 225 SEATTLE, WA 98101	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN MANZI DIRECTOR 2486 MATTERHORN DRIVE WEXFORD, PA 15090	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROL ANN PETREN DIRECTOR 1601 CHESTNUT STREET PHILADELPHIA, PA 19192	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTINE SMITH DIRECTOR 2216 PELHAM STREET HOUSTON, TX 77019	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARJORIE S. SUSMAN DIRECTOR 2000 L STREET, NW, SUITE 410 WASHINGTON, DC 20036	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRAN TSIMOYIANIS DIRECTOR 611 5TH AVENUE, NEW YORK, NY 10022	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RANDALL WINSTON DIRECTOR 12629 RIVERSIDE DRIVE, 3RD FLOOR VALLEY VILLAGE, CA 91607	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: KEITH BRUNINI OFFICER DIRECTOR
TITLE: VICE CHAIR
ADDRESS: 71 SOUTH WACKER DR., SUITE 500
CITY/ST/ZIP/CO: CHICAGO, IL 60606

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.

<u>/s/ SEUNG-AE CHUNG</u>	<u>SEUNG-AE CHUNG, ASST</u>	<u>7/25/2013</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TREASURER PRINTED NAME AND CORPORATE TITLE	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.