

1.) CORPORATION NAME:

DUE DATE: **4/30/2014**

American Lung Association

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1822693**

**CORPORATE CREATIONS NETWORK INC
4445 CORPORATION LN 2ND FL
VIRGINIA BEACH, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

ME

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1301 PENNSYLVANIA AVENUE NW STE. #800

CITY/ST/ZIP: WASHINGTON, DC 20004

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.

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ELIZABETH BAKER KEFFER	
TITLE:	DIRECTOR	
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MICHAEL CARSTENS	
TITLE:	DIRECTOR	
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MARIO CASTRO	
TITLE:	DIRECTOR	
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ARTHUR CERULLO	
TITLE:	DIRECTOR	
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN EMANUEL	
TITLE:	Secretary/Treas	
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KATHRYN A FORBES CPA	
TITLE:	DIRECTOR	
ADDRESS:	ELECTRIC APPLIATIONS 5706 NORTH CENTRAL AVE	
CITY/ST/ZIP/CO:	PHOENIX, AZ 85012	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAULINE GRANT DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN GRIFFIN DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VIRGINIA HALL DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DARIUS JOSEPH DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VENKATARAMA KOPPAKA DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROSS LANZAFAME DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANGELA MASTROFRANCESCO DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN NOLAN DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN O'Kane DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HARRY PERLSTADT DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AUSTIN PUGH DIRECTOR 1301 PENNSYLVANIA AVENUE, NW #800 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	JANE REARDON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004		
NAME:	ALBERT RIZZO	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004		
NAME:	JONATHON ROSEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004		
NAME:	PENNY SIEWERT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004		
NAME:	JEFFREY STEIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004		
NAME:	ROBERT TWEEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004		
NAME:	Linn Billingsley	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	Washington, DC 20004		
NAME:	Harold Wimmer	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	Washington, DC 20004		
NAME:	Adrienne Glasgow	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	1301 PENNSYLVANIA AVENUE, NW #800		
CITY/ST/ZIP/CO:	Washington, DC 20004		

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/ Adrienne Glasgow	Adrienne Glasgow, CFO	3/11/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	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.