

1.) CORPORATION NAME:

**THE FOUNDATION FOR ANESTHESIA EDUCATION
ANDRESEARCH**

DUE DATE: **1/31/2013**

SCC ID NO: **F1847203**

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
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 520 N. Northwest Hwy

CITY/ST/ZIP: Park Ridge, IL 60068

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:	Denham S. Ward, MD, PhD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	520 N. Northwest Hwy		
CITY/ST/ZIP/CO:	Park Ridge, IL 60068		

NAME:	Karen S. Williams, MD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	520 N. Northwest Hwy		
CITY/ST/ZIP/CO:	Park Ridge, IL 60068		

NAME:	Francis P. Hughes, PhD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	520 N. Northwest Hwy		
CITY/ST/ZIP/CO:	Park Ridge, IL 60068		

NAME:	Joseph P. Annis, MD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	520 N. Northwest Hwy		
CITY/ST/ZIP/CO:	Park Ridge, IL 60068		

NAME:	George T. Blike, MD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	520 N. Northwest Hwy		
CITY/ST/ZIP/CO:	Park Ridge, IL 60068		

NAME:	Danial Cole	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	520 N. Northwest Hwy		
CITY/ST/ZIP/CO:	Park Ridge, IL 60068		

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/ Denham S.Ward, MD, PhD	Denham S.Ward, MD, PhD,	12/29/2012
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.