

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 03, 2009
Secretary of State**

DOCUMENT# F05000002996

Entity Name: LEUKEMIA CLINICAL RESEARCH FOUNDATION, INC.

Current Principal Place of Business:

926 VALLEY OAKS ROAD
ST. PAUL, MN 551273641

New Principal Place of Business:

Current Mailing Address:

926 VALLEY OAKS ROAD
ST. PAUL, MN 551273641

New Mailing Address:

FEI Number: 41-1586846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLOOMFIELD, CLARA
Address: 320 W. 10TH AVENUE
City-St-Zip: COLUMBUS, OH 43210

Title: ST () Delete
Name: CHRISTISON, RICHARD J
Address: 148 DIVISADERO, UNIT C
City-St-Zip: SAN FRANCISCO, CA 94017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLOOMFIELD, CLARA
Address: 300 W.10TH AVENUE
City-St-Zip: COLUMBUS, OH 43210

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH D. ROWE

Electronic Signature of Signing Officer or Director

ADMI

05/03/2009

_____ Date