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Feb 26 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N25814 (7)
1. Corporation Name
THE RUTH K. BROAD BIOMEDICAL RESEARCH FOUNDATION, INC.



Principal Place of Business % ELLEN LUKEN 3100 TOWER BLVD. SUITE 700 DURHAM NC 27707 US	Mailing Address C/O ELLEN LUKEN 3100 TOWER BLVD. SUITE 700 DURHAM NC 27707-2563 US
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3. Date Incorporated or Qualified 04/07/1988	3a. Date of Last Report 02/07/1996
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

4. FEI Number 65-0045051	Applied For <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BUSSEL, ANN B.
420 ROVINO AVENUE
CORAL GABLES FL 33156**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERMAN, KAREN B	1.2 NAME	
STREET ADDRESS	145 CANDLEWOOD ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKY MOUNT NC	1.4 CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROAD, MORRIS N.	2.2 NAME	
STREET ADDRESS	3609 ALHAMBRA CT.	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSSEL, DEBORAH L.	3.2 NAME	
STREET ADDRESS	2372 PRAIRIE AVE.	3.3 STREET ADDRESS	3028 Aviation Avenue
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami, FL
TITLE	DT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSSEL, ANN B.	4.2 NAME	
STREET ADDRESS	420 AVE. ROVINO	4.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSSEL, JOHN M.	5.2 NAME	
STREET ADDRESS	150 W. 51ST ST., APT. 826	5.3 STREET ADDRESS	9 Island Avenue, Apt 2202
CITY-ST-ZIP	NEW YORK NY	5.4 CITY-ST-ZIP	Miami Beach, FL
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAGE, FRED H. P	6.2 NAME	
STREET ADDRESS	8500 GILMAN DR.	6.3 STREET ADDRESS	P. O. Box 85800 (N/A)
CITY-ST-ZIP	LAJOLLA CA	6.4 CITY-ST-ZIP	San Diego, CA 92186-5800

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ellen R. Luken DATE: 1/15/97 DAYTIME PHONE: (919) 419-3200

CR2E037 (9/96)

1995-96 BOARD OF DIRECTORS

THE RUTH K. BROAD BIOMEDICAL RESEARCH FOUNDATION, INC.

Class A Directors

Karen B. Berman
145 Candlewood Road
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Karen

Morris N. Broad
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(305) 667-9395/9459
(305) 662-4056 (Fax)
Morris

Ann B. Bussel
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Coral Gables, FL 33156
(305) 661-1115
(305) 661-1143 (call first)
Ann

Deborah Lea Bussel
3028 Aviation Avenue
Miami, FL 33133-3830
(305) 285-9172 (h)
(305) 245-3111 (w)
Debbie

John M. Bussel
9 Island Avenue, Apt. 2202
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(305) 358-9697 (h)
(305) 372-1260 (w)
John

Fred H. Gage, Ph.D.
Salk Inst. for Biological Studies
PO Box 85800
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(619) 453-4100 x1012
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Rusty

Manuel F. Utset, M.D., Ph.D.
c/o Jan Lab
Howard Hughes Medical Institute
University of California at San. Fran.
Campus Mail Stop 0724
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Manny

Class B Directors

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Duke University Medical Center
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(919) 681-7020 (Fax)
Ralph

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Joel

Class B. Directors. cont.

Thaddeus B. Wester, M.D.
Trustee
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PO Box 3126
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Thad

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(919) 419-1360 (Fax)
Ellen

Officers:

Chairman
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Ralph

Executive Director and President

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Ellen

Vice President

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Morris

Treasurer

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(305) 661-1115
(305) 661-1143 (call first)
Ann

Secretary

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Assistant Secretary

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Revised 10/28/96