2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2007 8:00 am
Secretary of State
04-11-2007 90018 036 ****70.00

DOCUMENT # N36411

1. Entity Name

PAPANICOLAOU CORPS FOR CANCER RESEARCH, INC.

Principal Place of Business	Mailing Address
1192 E NEWPORT CTR DR 120 DEERFIELD BEACH FL 33442 US	1192 E NEWPORT CTR DR 120 DEERFIELD BEACH FL 33442 US

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0171014 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DERNIS, MARTIN M.
2701 SW LEJEUNE ROAD
SUITE 401
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name GLORIA BERKOWITZ

Street Address (P.O. Box Number is Not Acceptable)

7551 REXFORD RD

City BOCA RATON FL Zip Code 33434

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T STEINER, DEBORAH 19787 OAKBROOK CIRCLE BOCA RATON FL 33434	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BERKOWITZ, GLORIA 7551 REXFORD RD BOCA RATON FL 33434	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PD BARBARA PESSEL 7144 VESUVIO PLACE BOYNTON BEACH FL 33437 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GOLDSTEIN, JOY 17011 GRAND BAY DRIVE BOCA RATON FL 33496	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VPD MYRA LIPKIN 7567 REXFORD RD BOCA RATON FL 33434 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Barbara Pessel BARBARA PESSEL 3-20-07 561-736-7772
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #