

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 11, 2002 8:00 am
Secretary of State

06-11-2002 90398 031 ****61.25

DOCUMENT # P40004

1. Entity Name

Cancer Research Institute, Inc.

80125019

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
681 Fifth Avenue

3. Mailing Address
681 Fifth Avenue

Suite, Apt. #, etc.

12th Floor

Suite, Apt. #, etc.

12th Floor

City & State
New York, NY

City & State
New York, NY

4. FEI Number
13-1837442

Applied For

Not Applicable

Zip
10022

Country
US

Zip
10022

Country
US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Capital Connections, Inc.

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

417 E. Virginia Street, Suite 1

City Tallahassee

FL

Zip Code 32301

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	SEE ATTACHMENT		

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Alfred R. Massidas

212-688-7515

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037B (12/01)



CANCER RESEARCH INSTITUTE

Attachment
P# P46004
B0125019

OFFICERS AND THE BOARD OF TRUSTEES

April 18, 2002

Chairman of the Board

Ms. Ann W. Jackson

Group President

Real Simple & Parenting

Time & Life Building, 41ST Floor

Rockefeller Center

New York, NY 10020

P) 522-4252 F) 467-1584

Marilyn X6192

H-P) 914-779-4184

H-F) 914-713-4653

Ann Jackson@timeinc.com

Carlos A. Ferrer

Partner

Ferrer Freeman & Company, LLC

10 Glenville Street

Greenwich, CT 06831

P) 203-532-8011 F) 203-532-8016

P Direct) 203-532-8030

Andreina

cferrer@ffandco.com

President

Patrick J. McGrath

Chairman and CEO

arnoldmcgrathworldwide

110 Fifth Avenue

New York, NY 10011

P) 463-1414 F) 463-1080

Kathy

pmcgrath@arnny.com

Donald J. Gogel

President and CEO

Clayton, Dubilier and Rice, Inc.

375 Park Avenue, 18th Floor

New York, NY 10152

P) 407-5240 F) 893-7061

Noreen 407-5283; Marion 407-5241

dgogel@cdr-inc.com

Vice Chairmen of the Board

Carter F. Bales

Partner

The Wicks Group of Companies

405 Park Avenue, Suite 702

New York, NY 10022

P) 838-2100 F) 223-2109

carter_bales@wicksgroup.com

Jacques C. Nordeman

Chairman

Nordeman Grimm, Inc.

717 Fifth Avenue, 26th Floor

New York, NY 10022

P) 702-9324 F) 980-1443

Assistant X9332

Nordeman@nordemangrimm.com

Edgar R. Berner

Managing Director

The Wicks Group of Companies

405 Park Avenue, Suite 702

New York, NY 10022

P) 838-2100 F) 223-2109

Edgar_berner@wicksgroup.com

Julian H. Robertson, Jr.

Chairman

Tiger Management Corporation

101 Park Avenue, 48th Floor

New York, NY 10178

P) 984-2515 F) 682-0368

Julie Depperschmidt X2424

Attachment
DH# P40004
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Treasurer

Bruce D. Dixon
20 Greenbriar Lane
Greenwich, CT 06831-3319
P/F) 203-629-1045
bdwdixon@yahoo.com

Secretary

Thomas G. Mendell
Partner
JP Morgan Partners
1221 Avenue of the Americas, 40th Floor
New York, NY 10020-1080
P) 899-3448 F) 899-3943
Nancy X3935
Tom.mendell@ipmorganpartners.com

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BOARD OF TRUSTEES

Howard P. Berkowitz
Managing Partner
HPB Associates, LP
65 East 55th Street, 30th Floor
New York, NY 10022
P) 583-0600 F) 583-0642
Pam Kramer
howard@hpbassoc.com

Richard S. Braddock
Chairman and CEO
priceline.com
375 Park Avenue
Suite 3107
New York, NY 10152
P) 212-980-6388
F) 212-980-6383
rick.braddock@priceline.com

Geoffrey O. Coley
Managing Director
Salomon Smith Barney
390 Greenwich Street, 4th Floor
New York, NY 10013
P) 723-6149 F) 723-8683
Nancy X6139
geoffrey.o.coley@citigroup.com

Maurice J. Cunniffe
Chairman and CEO
American Optical Corporation
80 Field Point Road
Greenwich, CT 06830
P) 203-622-6600 F) 203-622-1292

Stuart P. Davidson
Managing Director
Labrador Ventures
101 University Avenue, 4th Floor
Palo Alto, CA 94301
P) 650-366-6000 F) 650-366-6430
Kimberly
sdavidson@labrador.com

Richard M. DeMartini
President
Asset Management Group
Bank of America
NY1-301-48-02
9 West 57th Street, 48th Floor
New York, NY 10019
P) 212-847-6135 F) 212-847-6489
richard.demartini@bankofamerica.com

Steven A. Denning
Managing Partner
General Atlantic Partners
3 Pickwick Plaza, Suite 200
Greenwich, CT 06830
P) 203-629-8630 F) 203-622-4099
Joan Morris X8634
sdenning@gapartners.com

Glenn J. DeSimone
Chairman and CEO
Medicus Group International, Inc.
1675 Broadway
New York, NY 10019-5865
P) 468-3636 F) 468-3614
JoAnne X3949
desimong@medicusgroup.com

William O. Grabe
General Partner
General Atlantic Partners
3 Pickwick Plaza, Suite 200
Greenwich, CT 06830
Tel (203) 629-8647
Asst: Pat Ross
Bgrabe@gapartners.com

Oliver R. Grace, Jr.
55 Brookville Road, Suite #200
Brookville, NY 11545
P) 516-686-2207 F) 516-625-1204
Ella NY Phone) 310-0507
ograce@graceny.com

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Daniel L. Gray
Chairman and CEO
Northstar Consulting Group, Inc.
2328 W. Joppa Road, Suite 110
Lutherville, MD 21903
P) (410) 337-0018 F) (410) 337-7137
dgray@northstarconsultinggroup.com

Honorable Bill Green
14 East 60th Street
Suite 702
New York, NY 10022
P) 755-6528 F) 755-0021

Thomas S. Johnson
Chairman and CEO
GreenPoint Bank
90 Park Avenue, 4th Floor
New York, NY 10016
P) 212-834-1719 F) 212-834-1408
Cynthia or Robin
tjohnson@greenpoint.com

Mrs. Stephen M. Kellen
(Anna-Maria)
784 Park Avenue
New York, NY 10021
P) 535-6565 F) 737-0051
Patricia Coggins
P) 698-3204 F) 299-4400

Alexander P. Lynch
Vice Chairman, Mergers &
Acquisitions Group
J.P. Morgan Securities Inc.
277 Park Avenue, 3rd Floor
New York, NY 10172
P) 212-622-1156
F) 646 534-1747
Alex.lynch@jpmorgan.com

William E. Murray, Esq.
Chairman
Samuel Freeman Charitable Trust
The Savoy, Suite 4G
200 East 61st Street
New York, NY 10021
P) 832-2323 F) 319-5238
James or Mahri

Lloyd J. Old, M.D.
Director
Ludwig Institute for Cancer Research
605 Third Avenue
New York, NY 10158
P) 450-1510 F) 450-1515
Nancy Leyrer X1512
Theresa Pappas X1514
lold@licr.org

Andrew M. Paul
Chairman
Enhanced Capital Partners LLC
300 Park Avenue, 20th Floor
New York, NY 10022
P) 212-207-3385 F) 212-207-3386
apaul@enhancedcapital.net

Robert A. Posner
Managing Director
Commonwealth Holding, L.P.
184 Fisher Avenue
Brookline, MA 02445-5705
P) 617-232-5500 F) 617-232-5506
rap@commonwealth.usa.com

Robert P. Rittereiser
Chairman and CEO
Gruntal & Co.
One Liberty Plaza
New York, NY 10006
P) 820-8250 F) 820-8228
Anthea X8210
rittereiserr@gruntal.com

Attachment
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Lief D. Rosenblatt
Principal
Satellite Asset Management, L.P.
10 East 50th Street, 21st Floor
New York, NY 10022
Tel (212) 209-2025
Fax (212) 209-2010
liefr@satellite-ny.com

Chuck Scarborough
Broadcast Journalist
WNBC-TV
30 Rockefeller Plaza, Room 701
New York, NY 10112
P) 664-3087 F) 459-3931
Carol
scarbony@aol.com

Vance Van Dine
Advisory Director
Morgan Stanley Dean Witter & Co.
1221 Avenue of the Americas
30th Floor
New York, NY 10020
P) 762-8842 F) 762-8850
Ms. Porter X8849

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HONORARY TRUSTEES

Ms. Marjorie Atwood
5 Hammersmith Road
Newport, RI 02840
P) 401-847-5513

Roy J. Bostock
Chairman and CEO
B/com3, Inc.
825 8th Avenue, 33rd Floor
New York, NY 10019
P) 474-5050
Marie Donnelly X5434
rbostock@bcom3.com

Honorable Bill Bradley
Managing Director
Allen & Company, Inc.
711 Fifth Avenue, 9th Floor
New York, NY 10022
P) 339-2631 F) 339-2449

Donald G. Calder
President
G.L. Ohrstrom & Co., Inc.
717 Fifth Avenue, Floor 22
New York, NY 10022
P) 759-5380 F) 486-0935
Greta Pitkin
Dcalder2@aol.com

Mrs. Richard B. Englund
326 West 80th Street
New York, NY 10024
P) 873-3820

Wilbur H. Friedman, Esq.
Partner
Proskauer Rose LLP
1585 Broadway, Room 2016
New York, NY 10036
P) 969-3986 F) 969-2900/3000
Ann Green 4459

Mrs. Charles G. Gambrell
300 Cherokee Road
Charlotte, NC 28207
P) 704-375-3205

Charles M. Grace
11340 West Olympic Blvd.
Suite 185
Los Angeles, CA 90064
P) 213-477-0098

Mrs. Oliver R. Grace
Sterling Grace Capital Management, L.P.
515 Madison Avenue, 26 Floor
New York, NY 10022
P) 735-0604 F) 735-0638
Lorraine Ryan

Mrs. Joyce Green
28 Harbour Road
Kings Point, NY 11024
P) 516-487-9249

Alan J. Hirschfield
3490 Clubhouse Drive, Ste. 206
Wilson, WY 83014
P) 307-733-7332 F) 307-733-4935
ahirschfield@jnte.com

Wayne T. Jervis, Jr.
President
Jervismark, Inc.
12011 San Vicente Boulevard
Los Angeles, CA 90049
P) 310-471-2433

David B. Kinney
Managing Partner
Kinco
P.O. Box 559
754 Walker Road, 2nd Floor
Great Falls, VA 22066-0559
P) 703-757-0700 F) 703-757-0090

Attachment
R# P94/0004
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David H. Shepard
35 Aruba Bend
Coronado, CA 92118
P) 619-423-4427 F) 619-423-0214

Winthrop H. Smith, Jr.
Chairman
Merrill Lynch International
World Financial Center
250 Vesey Street
North Tower, 25th Floor
New York, NY 10281-1325
P) 449-6394 F) 449-6397
Terry Cunningham
wismith@exchange.ml.com