2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# P40004

Entity Name: CANCER RESEARCH INSTITUTE, INC.

Current Principal Place of Business:

55 BROADWAY
SUITE 1802
NEW YORK, NY 10006 US

New Principal Place of Business:

Current Mailing Address:

55 BROADWAY
SUITE 1802
NEW YORK, NY 10006 US

New Mailing Address:

FEI Number: 13-1837442 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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: C ( ) Delete
Name: GOGEL, DONALD J MR.
Address: 375 PARK AVENUE, 18TH FLOOR
City-St-Zip: NEW YORK, NY 10152 US

Title: T ( ) Delete
Name: DEMARTINI, RICHARD MR.
Address: 667 MADISON AVENUE, 10TH FLOOR
City-St-Zip: NEW YORK,, NY 10021 US

Title: CO-C ( ) Delete
Name: PAUL, ANDREW M MR.
Address: 350 PARK AVENUE, 24TH FLOOR
City-St-Zip: NEW YORK, NY 10022 US

Title: P ( ) Delete
Name: MCGRATH, PATRICK J MR.
Address: 36 HILLCREST DRIVE
City-St-Zip: PELHAM, NY 10803 US

Title: VC ( ) Delete
Name: BERNER, EDGAR R MR.
Address: 485 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022 US

Title: S ( ) Delete
Name: MENDELL, THOMAS G MR.
Address: 667 MADISON AVENUE, 21 FLOOR
City-St-Zip: NEW YORK, NY 10021 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JILL O'DONNELL-TORMEY DIR 04/27/2009
Electronic Signature of Signing Officer or Director — Date