

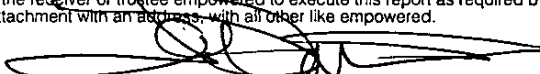


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90525 012 ****61.25

DOCUMENT # 763549 1. Entity Name BRISTOL-MYERS SQUIBB FOUNDATION, INC.					
Principal Place of Business 345 PARK AVE. NEW YORK, NY 10154			Mailing Address 345 PARK AVE. NEW YORK, NY 10154		
2. Principal Place of Business		3. Mailing Address		<div style="font-size: 24pt; font-weight: bold; margin-bottom: 10px;">50045789</div>  <div style="display: flex; justify-content: space-between; font-size: 10pt;"> 0420205 Chg-NP CR2E037 (10/03) </div>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 13-3127947				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
FALCON, HOWARD J., JR. 125 WORTH AVENUE PALM BEACH, FL				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	DP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DAMONTI, JOHN L		NAME		
STREET ADDRESS	10 PINE HILL ROAD		STREET ADDRESS		
CITY - ST - ZIP	STOCKTON, NJ 08559		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCGOLDRICK, JOHN		NAME		
STREET ADDRESS	25 VANDEVENTER AVE		STREET ADDRESS		
CITY - ST - ZIP	PRINCETON, NJ 085426937		CITY - ST - ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BAINS, HARRISON M. J		NAME	Edward Dwyer	
STREET ADDRESS	14 ESSEX RD.		STREET ADDRESS	100 Overlook Lane	
CITY - ST - ZIP	SUMMIT, NJ		CITY - ST - ZIP	Staint Davids, PA 19087	
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEUNG, SANDRA		NAME		
STREET ADDRESS	100 HEMLOCK DRIVE		STREET ADDRESS		
CITY - ST - ZIP	STAMFORD, CT 06902		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEAR, STEPHEN E		NAME		
STREET ADDRESS	32 LINCOLN STREET		STREET ADDRESS		
CITY - ST - ZIP	LARCHMONT, NY 10538		CITY - ST - ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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 Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: 			<div style="display: flex; justify-content: space-between;"> 4/21/05 212-546-4566 </div>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		