

**2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23383

**Entity Name:** CHILDREN'S TUMOR FOUNDATION, INC.**Current Principal Place of Business:**725 36TH AVENUE NORTH  
ST PETERSBURG, FL 33704**Current Mailing Address:**370 LEXINGTON AVE RM2100  
NEW YORK, NY 10017 US**FEI Number:** 13-2298956**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EARLE, SUZANNE  
725 36TH AVENUE NORTH  
ST. PETERSBURG, FL 33704 US*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BAKKER, ANNETTE  
Address        370 LEXINGTON AVE RM2100  
City-State-Zip: NEW YORK NY 10017

Title            TREASURER  
Name            BRAININ, ROBERT  
Address        52 RAWSON RD  
City-State-Zip: BROOKLINE MA 02445

Title            DIRECTOR  
Name            GALLOWAY, TRACY  
Address        131 FARMER'S FOLLY DRIVE  
City-State-Zip: MOORESVILLE NC 28117

Title            DIRECTOR  
Name            GILBERT, DANIEL  
Address        26875 CHARLES LANE  
City-State-Zip: FRANKLIN MI 48025

Title            DIRECTOR  
Name            ALTMAN, DANIEL  
Address        99 MICHELLE DRIVE  
City-State-Zip: JERICO NY 11753

Title            DIRECTOR  
Name            BROOKS, BILL  
Address        5218 ST. REGIS PLACE  
City-State-Zip: ORLANDO FL 32812

Title            DIRECTOR  
Name            GOLFINOS, JOHN  
Address        530 FIRST AVENUE, SUITE 8R  
City-State-Zip: NEW YORK NY 10016

Title            SECRETARY  
Name            GROISMAN, GABRIEL  
Address        191 BAL BAY DRIVE  
City-State-Zip: BAL HARBOUR FL 33154

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** ANNETTE BAKKER**PRESIDENT****02/01/2021**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	CHAIRMAN
Name	HORVITZ, RICHARD
Address	85 STONEWOOD DRIVE
City-State-Zip:	MORELAND HILLS OH 44022

  

Title	DIRECTOR
Name	KORF, BRUCE
Address	7351 KINGS MOUNTAIN ROAD
City-State-Zip:	BIRMINGHAM AL 35242

  

Title	DIRECTOR
Name	MARTIN, LINDA
Address	67 BROADVIEW AVENUE
City-State-Zip:	NEW ROCHELLE NY 10804

  

Title	DIRECTOR
Name	MCKENZIE, STEVE
Address	6655 PORTSHEAD ROAD
City-State-Zip:	MALIBU CA 90265

  

Title	DIRECTOR
Name	STOVALL O'DAY, MICHIE
Address	42 MOODY ST., APT 1
City-State-Zip:	PORTLAND ME 04101

  

Title	DIRECTOR
Name	PETERSON, MICHAEL
Address	17271 AVENIDA DE LA HERRADURA
City-State-Zip:	PACIFIC PALISADES CA 90272

  

Title	DIRECTOR
Name	RUDD, KENNETH
Address	200 RIVERSIDE BLVD, APT. 111
City-State-Zip:	NEW YORK NY 10069

  

Title	DIRECTOR
Name	SOLL, RICHARD
Address	17 MEETING HOUSE SQUARE
City-State-Zip:	MIDDLETOWN MA 01949

  

Title	DIRECTOR
Name	STERN, ED
Address	178 NEHOIDEN ROAD
City-State-Zip:	WABAN MA 02468

  

Title	DIRECTOR
Name	TIVEN, RACHEL
Address	595 WEST END AVENUE
City-State-Zip:	NEW YORK NY 10024

  

Title	DIRECTOR
Name	WALKER, NATE

Title	DIRECTOR
Name	HAY, MATT
Address	16615 DOWNSTREAM DRIVE
City-State-Zip:	WESTFIELD IN 46062

  

Title	DIRECTOR
Name	LEATHERS, CHAD
Address	3435 W CONEJOS PL
City-State-Zip:	DENVER CO 80204

  

Title	DIRECTOR
Name	MCCARTHY, JOHN
Address	11 CANDLELIGHT DRIVE
City-State-Zip:	HOLMDEL NJ 07733

  

Title	DIRECTOR
Name	MOSS, RENIE
Address	1720 2ND AVE S
City-State-Zip:	BIRMINGHAM AL 35294

  

Title	DIRECTOR
Name	PERFETTI, LAURA
Address	57 SUGAR MAPLE LANE
City-State-Zip:	GLEN COVE NY 11542

  

Title	DIRECTOR
Name	ROBBINS, ALAN
Address	2778 SOUTH OCEAN BOULEVARD, APT. N307
City-State-Zip:	PALM BEACH FL 33480

  

Title	DIRECTOR
Name	SETLOW, CAROLYN
Address	53 LOWER CHURCH HILL RD.
City-State-Zip:	WASHINGTON DEPOT CT 06794

  

Title	TREASURER
Name	STANICKY, RANDALL
Address	471 WEST BROADWAY, 2ND FLOOR
City-State-Zip:	NEW YORK NY 10012

  

Title	DIRECTOR
Name	MATCH SUNA, STUART
Address	3 E. 84TH STREET
City-State-Zip:	NEW YORK NY 10028

  

Title	DIRECTOR
Name	VISKOCHIL, DAVID
Address	1455 INDIAN HILLS DRIVE
City-State-Zip:	SALT LAKE CITY UT 84108

  

Title	DIRECTOR
Name	WALLACE, PEGGY
Address	2434 NW 15TH PLACE

Address 18021 SWEET ELM DRIVE

City-State-Zip: ENCINO CA 91316

City-State-Zip: GAINESVILLE FL 32605

Title VP

Name BOURNE, SARAH

Address 370 LEXINGTON AVE RM 2100

City-State-Zip: NEW YORK NY 10017