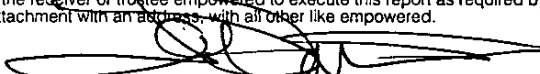


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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		50045789 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 13-3127947				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				04202005 Chg-NP CR2E037 (10/03)	
6. Name and Address of Current Registered Agent FALCON, HOWARD J., JR. 125 WORTH AVENUE PALM BEACH, FL				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		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	DP DAMONTI, JOHN L 10 PINE HILL ROAD STOCKTON, NJ 08559	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MCGOLDRICK, JOHN 25 VANDEVENTER AVE PRINCETON, NJ 085426937	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BAINS, HARRISON M. J 14 ESSEX RD. SUMMIT, NJ	☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition T Edward Dwyer 100 Overlook Lane Staint Davids, PA 19087
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S LEUNG, SANDRA 100 HEMLOCK DRIVE STAMFORD, CT 06902	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BEAR, STEPHEN E 32 LINCOLN STREET LARCHMONT, NY 10538	☐ 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 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: 				Date 4/21/05 Daytime Phone # 212-546-4566	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					