

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003021

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** BARNES-JEWISH HOSPITAL FOUNDATION CORP.

## Current Principal Place of Business:

ATTN: MARILYN RAPHAEL  
600 S. TAYLOR AVENUE, SUITE 120  
ST. LOUIS, MO 63110

## New Principal Place of Business:

ATTN: MARILYN RAPHAEL  
1001 HIGHLANDS PLAZA DR., WEST SUITE 140  
ST. LOUIS, MO 63110

## Current Mailing Address:

ATTN: MARILYN RAPHAEL  
600 S. TAYLOR AVENUE, SUITE 120  
ST. LOUIS, MO 63110

## New Mailing Address:

ATTN: MARILYN RAPHAEL  
1001 HIGHLANDS PLAZA DR., WEST SUITE 140  
ST. LOUIS, MO 63110

FEI Number: 43-1648435

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLORIDA INCORPORATORS, INC.  
8875 HIDDEN RIVER PARKWAY, SUITE 300  
TAMPA, FL 33637 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: EVP ( ) Delete  
Name: ZISKIND, ANDREW M.D.  
Address: ONE BARNES-JEWISH PLAZA MS 90-71-311  
City-St-Zip: ST. LOUIS, MO 63110

Title: VP ( ) Delete  
Name: RUVELSON, JULIA S  
Address: 600 S. TAYLOR AVE, #120, M.S. 90-94-206  
City-St-Zip: ST. LOUIS, MO 63110

Title: C ( ) Delete  
Name: KLING, S. LEE  
Address: 9990 OLD OLIVE STREET ROAD, SUITE 107  
City-St-Zip: ST. LOUIS, MO 63105

Title: VC ( ) Delete  
Name: GOLDBERG, SUSAN K  
Address: 8 GLEN CREEK LANE  
City-St-Zip: ST. LOUIS, MO 63124

Title: VC ( ) Delete  
Name: MILLSTONE, ROBERT D  
Address: 7701 FORSYTH, SUITE 925  
City-St-Zip: ST. LOUIS, MO 63105

Title: VC ( ) Delete  
Name: WALLACE, HARVEY N  
Address: 1050 N. LINDBERGH  
City-St-Zip: ST. LOUIS, MO 63132

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: RUVELSON, JULIA S  
Address: 1001 HIGHLANDS PLAZA DR., WEST SUITE 140  
City-St-Zip: ST. LOUIS, MO 63110

Title: C (X) Change ( ) Addition  
Name: STEINBACK, KENNETH B  
Address: 9990 OLD OLIVE STREET ROAD  
City-St-Zip: ST. LOUIS, MO 63141

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: JULIA S. RUVELSON

VP

01/07/2009

Electronic Signature of Signing Officer or Director

Date