SE AMOUNT	COND NOTICE: CORPORATION WILL B DUE ON OR BEFORE 8/7/96: \$61.25 (IF DIS	E DISSOLVER	D ON OR AFTER	R AUGL De to R	JST 7, 1996. EINSTATE: \$236.25.	· · · · · · · · · · · · · · · · · · ·			
	NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPA Sandra	RTMEN B. Mort ary of Si	IT OF STATE tham tate				
DOCUMENT # N9400004351 (2)						1			
GEFFEN CANCER CENTER AND RESEARCH INSTITUTE FOUN DATION, INC.						l 1 1810/181 old Yalih alahi bakir bakir bakir	Bodi Diri Ofia Diam	, YERAK ALTI ALTI ALTI ALTI	
Principa	al Place of Business	Mailing	Address				u i i i i i i i i i i i i i i i i i i i		
981 37TH PL 981 37TH PL 981 37TH PL VERO BEACH FL 32960 VERO BEACH FL 32960									
						3. Date Incorporated or Qualified 09/06/1994	3a. Date of Las 05/01]
2. Princ 21	cipal Place of Business	28. Maili 26	ing Address			4. FEI Number 65-0536017		Applied For Not Applicable	
Suite 22	e, Apt. #, etc.		e, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required	
City 23	& State		& State			6. Election Campaign Financing Trust Fund Contribution	\$5.0	00 May Be ad to Fees	
Zip 24	Country 25	Zıp [29]		30 C	ountry	8. This corporation has liability for in Florida Statutes			
	9. Name and Address of Curren		Agent		81 Name	10. Name and Address of New Reg			ľ
Compton, Robert J C/O Compton & Associates - 117 Queen Christina Ct Ft Pierce FL 34949					82 Street Addre	ess (P.O. Box Number is Not Acceptable	2)		
	-				84 City			ip Code	
offic age	suant to the provisions of Sections 617.050 ce or registered agent, or both, in the State ent. I am familiar with, and accept the oblig:	2 and 617.150 of Florida Suc ations of, Secti	8, Florida Statute change was a on 617.0503, Flo	es, the a uthorize orida Sta	above-named corpo ad by the corporatio atutes.	pration submits this statement for the pur in's board of directors. I hereby accept the	pose of changing ne appointment as	its registered registered	
SIGNAT	Signature typed or printed name of registered age			E Registe	pred Agent signature require	ad when reinstating)	DAYE		1
12. TITLE	EDO	ID DIRECTORS	DELETE	13	3. TITLE	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	ORS IN 12 e Addition	3/96)
NAME STREET ADI CITY - ST - Z				1.3	NAME STREET ADDRESS CITY - ST - ZIP				72E037 (3/96)
TITLE	T BERGER, GARY CPA		DELETE	21	TITLE		Change		ő
STREET ADD CITY - ST - ZI	DRESS 1111 ORANGE AVE. STE. 3	00		2.3	STREET ADDRESS				
TITLE	Т		DELETE	3.1	I CITY - ST - ZIP TITLE		Change	e Addition	
STREET ADD		8			NAME STREET ADDRESS				
CITY-ST-2 TITLE	TULLATIOMA TN 37388		DELETE		CITY - ST - ZIP TITLE	**	Change	e Addition	
NAME STREET ADD			_		NAME				
CITY-ST-ZI					STREET ADDRESS CITY - ST - ZIP				
TITLE NAME			DELETE		TITLE	100001882 -07/03/9601024	2931 ^{Change}	Addition	
STREET ADD					NAME STREET ADDRESS	-07/03/9601024 ***286.25	020		
CITY-ST-ZI TITLE	P		DELETE	_	CITY-ST-ZIP TITLE		Change	Addition	
NAME					NAME	6			
STREET ADD	P			640	STREET ADDRESS CITY - ST - ZIP	Z	<u>, </u>		
	hereby certify that the information supplied er certify that the information indicated on the under path, that Lam an officer or director								
	e under oath; that I am an officer or directo my name appears in Block 12 or Block 13					to execute this report as required by Cha	apter 617, Florida : M:/	Statutes; and	
SIGN	IATURE:	PUNTED NAME OF	JIGHING OFFICER O	12	the m	D, PRODEUT (18/96 5 Daytime Phone A	5600	I