

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 27, 2003 8:00 am**  
**Secretary of State**

02-27-2003 90123 032 \*\*\*\*61.25

**DOCUMENT # N95000005545**

1. Entity Name

**NATIONAL OVARIAN CANCER COALITION, INC.**



Principal Place of Business

**500 NE SPANISH RIVER BLVD. STE 14  
BOCA RATON FL 33431**

Mailing Address

**500 NE SPANISH RIVER BLVD. STE 14  
BOCA RATON FL 33431**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0628064**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GARELLEK, STEVEN ESQ.  
700 S. FEDERAL HWY  
STE 200  
BOCA RATON FL 33432**

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

**FILE NOW: FEE IS \$61.25**

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	<b>P ADAMS, J R 621 ANDERSON BLVD GENEVA IL 60134</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CH METHOD, MICHAEL W MD 707 E CEDAR ST #200 SOUTH BEND IN 46617</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D GERSTEIN, WILLIAM 1300 NORTH FEDERAL HWY #203 BOCA RATON FL 33432</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D GARELLEK, STEVEN 7000 WEST PALMETTO RD #400 BOCA RATON FL 33432</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DAVID, GABER 222 EAST THIRD STREET HINSDALE IL 60521</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ED STEIN, MAXINE 500 NE SPANISH RIVER BLVD #14 BOCA RATON FL 33431</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P MARIA CIESLA 7008 N. McALPIN AVE. CHICAGO IL 60646</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP JANE LANGRIDGE 121 ELSIE ST. SAN FRANCISCO, CA 94110</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*SPONSOR AND REGISTRAR* **VP. Finance 2/19/03 561 393-0005**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)

Attachment: 90037669  
#N95000005545

## NOCC BOARD OF DIRECTORS 2003

### OFFICERS

**Maria Ciesla, President**  
7008 N. McAlpin Ave.  
Chicago, IL 60646

**Maxine Stein**  
**Executive Director**  
500 NE Spanish River Blvd. #14  
Boca Raton, FL 33432  
(  
(

**Marc Papillon**  
7258 Innisfree Ln.  
Dublin, OH 43017

**Jane Langridge, Chair**  
121 Elsie St.  
San Francisco, CA 94110

**Lori Hayward**  
**Vice President of Finance**  
500 NE Spanish River Blvd. #14  
Boca Raton, FL 33432

**Robert Schachter**  
25 Dolphin Green, Apt. 1A  
Port Washington, NY 11050

**Suzy Lockwood-Rayermann, RN, Ph.D.**  
**Vice-President**  
6024 Welch Ave.  
Ft. Worth, TX 76133

### DIRECTORS AT LARGE

**Jamie Docteroff**  
2070 No. Ocean Blvd.  
Boca Raton, FL 33431

### HONORARY BOARD MEMBERS

**Fred Hayward**  
942 NW 6th Ave.  
Boca Raton, FL 33434

**Steven Garellek, Esq.**  
**General Counsel**  
Adorno & Yoss, P.A.  
700 So. Federal Hwy., Suite 200  
Boca Raton, FL 33432

**William Gerstein, Esq.**  
Gerstein & Gerstein, Attorneys, P.A.  
700 So. Federal Hwy., Suite 200  
Boca Raton, FL 33432

**Judith R. Adams**  
623 Anderson Blvd.  
Geneva, IL 60136

**David Gaber, Treasurer**  
222 East Third St.  
Hinsdale, IL 60521

**Kris Ghosh, M.D.**  
Gynecology Oncology Associates  
9850 Genesee Ave.  
Suite # 570  
Lajolla, CA 92037

**Mimi Howard, Secretary**  
Environmental Matters  
31 Cambria Rd. W  
Palm Beach Gardens, FL 33418

**Jennifer Gremmels**  
Nichols & Dezenhall  
1130 Connecticut Ave. NW  
Suite # 600  
Washington, DC 20036