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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P34288

(1)

1. Corporation Name

THE BROOKDALE FOUNDATION, INC.



Principal Place of Business

Mailing Address

126 E. 56TH STREET  
10TH FLOOR  
NEW YORK NY 10022-3668  
US

126 E. 56TH STREET  
10TH FLOOR  
NEW YORK NY 10022-3668  
US

3. Date Incorporated or Qualified

06/04/1991

3a. Date of Last Report

03/06/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

13-6076863

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HALL, VALERIE A.  
15693 ANDERSON LANE  
FT. MYERS FL 33912

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME SCHWARTZ, STEPHEN L. ☐ DELETE  
STREET ADDRESS 425 E. 58TH STREET  
CITY- ST- ZIP NEW YORK NY

TITLE VPD  
NAME VAN CLIEF, MARY ANN ☐ DELETE  
STREET ADDRESS 601 TEANECK ROAD  
CITY- ST- ZIP RIDGEFIELD PARK NJ

TITLE TS  
NAME PEREIRA, JEANETTE ☐ DELETE  
STREET ADDRESS 180 FLORAL PARKWAY  
CITY- ST- ZIP FLORA PARK NY

TITLE D  
NAME FIELD, ARTHUR NORMAN ☐ DELETE  
STREET ADDRESS 35 SUTTON PLACE  
CITY- ST- ZIP NEW YORK NY

TITLE AVP  
NAME BIGGS, VICTOR ☐ DELETE  
STREET ADDRESS 1941 MASSACHUSETTS AVE  
CITY- ST- ZIP ENGLEWOOD FL

TITLE D  
NAME JULIBER, LOIS ☐ DELETE  
STREET ADDRESS 75 E. END AVENUE  
CITY- ST- ZIP NEW YORK NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VKE-PRESIDENT

3-12-96

(212) 308-7355

Date Daytime Phone

CR2E037 (12/95)