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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34349

1. Corporation Name

NATIONAL BRAIN TUMOR FOUNDATION INCORPORATED

Principal Place of Business

785 MARKET ST.
SUITE 1600
SAN FRANCISCO CA 94103

Mailing Address

785 MARKET ST.
SUITE 1600
SAN FRANCISCO CA 94103



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date incorporated or Qualified

06/18/1991

4. FEI Number

94-2876985

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

GURWITCH, SHIRLEY
2525 SUNSET DR.
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

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 D
NAME KERN, ARTHUR H.
STREET ADDRESS 1700 MONTGOMERY ST. #324
CITY-ST-ZIP SAN FRANCISCO CA ☐ DELETE

TITLE PD
NAME LAMB, SHARON
STREET ADDRESS 2942 DIVISADERO ST.
CITY-ST-ZIP SAN FRANCISCO CA ☐ DELETE

TITLE VD
NAME BRODERSON, RICHARD
STREET ADDRESS 5237 GOLDEN GATE AVE.
CITY-ST-ZIP OAKLAND CA ☐ DELETE

TITLE M
NAME BREWER, JANIS C
STREET ADDRESS 785 MARKET ST #1600
CITY-ST-ZIP SAN FRANCISCO CA 94103 ☐ DELETE

TITLE CD
NAME NEWMAN, WALTER
STREET ADDRESS 870 MARKET, #917
CITY-ST-ZIP SAN FRANCISCO CA ☐ DELETE

TITLE D
NAME FARBER, CONNIE
STREET ADDRESS 1272 CAROLINE ST.
CITY-ST-ZIP ALAMEDA CA ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

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

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. 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 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janis C Brewer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/27/99 (415) 284 0208

CR2E037 (1/98)