Applied For

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P39000

1. Corporation Name

NATIONAL LEUKEMIA RESEARCH ASSOCIATION, INC.

Principal Place of Business
585 STEWART AVE.
GARDEN CITY NY 11530
IIS

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

585 STEWART AVE. GARDEN CITY NY 11530

2a. Mailing Address

Suite, Apt. #, etc.

US



06-24-1999 90021 036 ****61.25



3. Date Incorporated or Qualifed

-05/28/1992 4. FEI Number

City & State City & State City & State City & State 5. Certificate of Status Desired Fee Required Zip Country Co	Suite, Apt.	#, etc.	27	ь, др., т. ото.					11-21067	78		Not	Applicable
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9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Octoor of Agent Agen								- (6. Election Can	npaign Financing		\$5.00 +	May Be
PEREZ, RAYMOND V 180 N.E. 128 TERRACE MIAMI FL 33161 19. Variety (P.O. Box Number is Not Acceptable) 19. Variety (P.O. Box Number is	24	25 29 30						}	Trust Fund C	Contribution	_ 	Added to	Fees
PEREZ, RAYMOND V 180 N.E. 128 TERRACE MIAMI FL 33161 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. are familiar with, and accept the obligations of, Section 17.0503, Florida Statuties. SIGNATURE Specific or registered agent. are familiar with, and accept the obligations of, Section 17.0503, Florida Statuties. SIGNATURE Specific or registered agent. are familiar with, and accept the obligations of, Section 17.0503, Florida Statuties. SIGNATURE Specific or registered agent are familiar with, and accept the obligations of, Section 17.0503, Florida Statuties. SIGNATURE Specific or registered agent are familiar with a speciation. INDEX SCHWAB, GILBERT 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITIME SCHWAB, GILBERT 11. STREET ADDRESS GIT'S 17.2P PLAINIEW NY 11. STREET ADDRESS GIT'S 17.2P PLAINIEW NY 12. TITLE STREET ADDRESS GIT'S 17.2P SUPPLIANIEW NY 13. STREET ADDRESS GIT'S 17.2P SUPPLIANIEW NY 1425, BROADWAY 22. AURE 24. CITY ST. 2P 14. CITY ST. 2P 15. TAUBER DRIVE 15. STREET ADDRESS GIT'S 17.2P SUPPLIANIEW NY 16. SCHER, PETER 24. CITY ST. 2P 17. SCHER, PETER 24. CITY ST. 2P 18. SCHER, PETER 24. CITY ST. 2P 19. Change Addition Addition STREET ADDRESS GIT'S 17.2P SUPPLIANIEW NY 17. SCHERE ADDRESS GIT'S 17.2P 19. Change Addition Addition SUPPLIANIEW NY 19. Change Addition SUPPLIANIEW NY 19. Change Addition SUPPLIANIEW NY 19. Change Addition Addition SUPPLIANIEW NY 19. Change Addition SUPPLIANIEW NY 19. Change Addition SUPPLIANIEW NY 19. Change Addition Addition SUPPLIANIEW NY 19. Change Addition SUPPLIANIEW NY 19. Change Addition SUPPL			Registered	l Agent		10. Name and Address of New Registered Agent							
11. Pursuant to the provisions of Sections 617.0502 and 617.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE					_	81	Name						
11. Pursuant to the provisions of Sections 617.0502 and 617.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE	DEDE7 Ø	AVMOND V				92	Stroot Ac	ddroes	(P.O. Boy Num	her is Not Accent	able)		
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### 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 to an armillar with, and accept the obligations of, Section 617.0502 Florida Statutes. The company of the corporation's board of directors. I hereby accept the appointment as registered agent to an armillar with, and accept the obligations of, Section 617.0502 Florida Statutes. The company of the corporation's board of directors. I hereby accept the appointment as registered agent to a first agent agent to a first agent to a first agent to a first agent to a first						83					_		
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4. 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:

TO NATOUS REQUIRES

6/17/99 5762221944

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