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Jul 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P39544** **(2)**

1. Corporation Name

THE CANCER RESEARCH FOUNDATION OF AMERICA, INC.

Principal Place of Business	Mailing Address
200 DAINGERFIELD ROAD ALEXANDRIA VA 22314 US	200 DAINGERFIELD ROAD ALEXANDRIA VA 22314-2884 US

3. Date Incorporated or Qualified: **07/08/1992**
3a. Date of Last Report: **04/01/1996**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: **52-1429544** ☐ 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

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
WELLMAN, JOYCE O. **3125 MORRISON** **TAMPA FL 33629**	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BENNETT, CATHERINE		1.2 NAME		
STREET ADDRESS	1455 PENNSYLVANIA AVENUE, NW #925		1.3 STREET ADDRESS		
CITY-ST-ZIP	WASHINGTON DC		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	KLESHISHIAN, HAROLD M		2.2 NAME		
STREET ADDRESS	4502 STANFORD		2.3 STREET ADDRESS		
CITY-ST-ZIP	CHEVY CHASE MD		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ALDIGE, CAROLYN		3.2 NAME		
STREET ADDRESS	200 DANGERFIELD RD, SUITE 200		3.3 STREET ADDRESS		
CITY-ST-ZIP	ALEXANDRIA VA		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	ALABASTER, OLIVER		4.2 NAME		
STREET ADDRESS	2300 I ST., NW		4.3 STREET ADDRESS		
CITY-ST-ZIP	WASHINGTON DC		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	LANDRY, BROCK		5.2 NAME	Landry, Brock	
STREET ADDRESS	601 13TH ST NW, 12TH FLOOR		5.3 STREET ADDRESS	Dergott, Baetjer et al	
CITY-ST-ZIP	WASHINGTON DC		5.4 CITY-ST-ZIP	1201 New York, Washington DC 20005	
TITLE	D	☒ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BERRY, MR. PAUL		6.2 NAME		
STREET ADDRESS	3007 TILDEN ST NW		6.3 STREET ADDRESS		
CITY-ST-ZIP	WASHINGTON DC 20008		6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do 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.

SIGNATURE C. [illegible] DATE 7/13/1997