


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90279 043 ****61.25

DOCUMENT # F93000002142			
1. Entity Name CANCER TREATMENT RESEARCH FOUNDATION, INC.			
Principal Place of Business 1336 BASSWOOD RD SUITE 122 SCHAUMBURG, IL 60173		Mailing Address 3150 SALT CREEK LANE ARLINGTON HEIGHTS, IL 60005	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>1336 Basswood Road</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>Schaumburg, IL</i>	
Zip	Country	Zip	Country
<i>60173</i>		<i>60173</i>	<i>USA</i>
4. FEI Number 73-1386920		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		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 _____ DATE _____			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	CD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEPHENSON, ALICIA L	NAME	
STREET ADDRESS	125 BUCKLEY RD.	STREET ADDRESS	
CITY-ST-ZIP	BARRINGTON HILLS, IL 60010	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAYO, ROBERT W	NAME	
STREET ADDRESS	112 BRINKER ROAD	STREET ADDRESS	
CITY-ST-ZIP	BARRINGTON HILLS, IL 60010	CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, KEN	NAME	
STREET ADDRESS	36474 DOUGLASD TERRACE	STREET ADDRESS	<i>2355 S. Arlington Heights Road, #110</i>
CITY-ST-ZIP	GURNEE, IL 60031	CITY-ST-ZIP	<i>Arlington Heights, IL 60005</i>
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUBIN, BRUCE	NAME	
STREET ADDRESS	135 S LASALLE STREET	STREET ADDRESS	
CITY-ST-ZIP	CHICAGO, IL 60603	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAYTON, CONNIE	NAME	
STREET ADDRESS	3150 SALT CREEK LANE SUITE 122	STREET ADDRESS	<i>1336 Basswood Road</i>
CITY-ST-ZIP	ARLINGTON HEIGHTS, IL 60005	CITY-ST-ZIP	<i>Schaumburg, IL 60173</i>
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREGOIRE, JOSEPH	NAME	
STREET ADDRESS	2021 SPRING RD SUITE 600	STREET ADDRESS	
CITY-ST-ZIP	OAK BROOK, IL 60523	CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>Melissa L. Pontikes</i>		Date: <i>4/19/07</i> 847/342-7450	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
<i>Melissa L. Pontikes, President</i>			

ATTACHMENT

40078282

Cancer Treatment Research Foundation, Inc.

F93000002142

Officers and Directors (continued)

P Melissa Pontikes 1336 Basswood Road Schaumburg, IL 60173	SD Maryl L. Smith 6201 75th Street, Suite 102 Kenosha, WI 53142
TD Rod Murray 125 S. LaSalle Street Suite 216 Chicago, IL 60603	AS Steve Kroll 1336 Basswood Road Schaumburg, IL 60173
AT Lois Conklin 1336 Basswood Road Schaumburg, IL 60173	D Dottie Rzeszutko 4 Eastings Way South Barrington, IL 60010
D Robert E. Graham 225 West Wacker Drive, Suite 1400 Chicago, Illinois 60606	D Billy Davis, Jr. 1336 Basswood Road Schaumburg, IL 60173
D Bruce Lubin 135 So. LaSalle Street Chicago, IL 60603	D Marilyn McCoo 1336 Basswood Road Schaumburg, IL 60173
D Thomas R. Duensing 28955 West Midway Street Cary, Illinois 60013-9753	