TAUBMAN CENTERS INC Form SC 13G September 12, 2001

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

WASHINGTON, D.C. 20549

SCHEDULE 13G

UNDER THE SECURITIES EXCHANGE ACT OF 1934

Taubman Centers Inc. (NAME OF ISSUER)

Common Stock (TITLE OF CLASS OF SECURITIES)

876664103 (CUSIP NUMBER)

August 29, 2001 (DATE OF EVENT WHICH REQUIRES FILING OF THIS STATEMENT)

CHECK THE APPROPRIATE BOX TO DESIGNATE THE RULE PURSUANT TO WHICH THIS SCHEDULE IS FILED:

- [] RULE 13D-1(B)
- [x] RULE 13D-1(C)
- [] RULE 13D-1(D)

1		NAME OF REPORTING PERSON: Stichting Pensioenfonds voor de Gezondheid, Geestelijke en Maatschappelijke Belangen					
S.S. or I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 58-6192550							
2			ALATE BOX IF A MEMBER OF A GROUP* (a) [] (b) []				
3	SEC USE ONLY						
4	CITIZENSHIP	OR PI	ACE OF ORGANIZATION				
	The Netherl	ands					
		5	SOLE VOTING POWER				
			0				
	IBER	6	SHARED VOTING POWER				
OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH			2,552,000				
		7	SOLE DISPOSITIVE POWER				
			0				
		8	SHARED DISPOSITIVE POWER				
			2,552,000				
9	AGGREGATE	AMOUN	IT BENEFICIALLY OWNED BY EACH REPORTING PERSON				
	2,552,000						
10	CHECK BOX	IF TH	E AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*				
11	PERCENT O	F CLAS	S REPRESENTED BY AMOUNT IN ROW 9				
	5.002%						
12	TYPE OF R	TYPE OF REPORTING PERSON*					
	00						

*SEE INSTRUCTIONS BEFORE FILLING OUT!

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ITEM 1.					
	(a)	Name of Issuer			
		Taubman Centers Inc.			
	(b)	Address of Issuer's Princ.	ipal Executive Offices		
		200 East Long Lake Road			
		Suite 300			
		P.O. Box 200			
		Bloomfield Hills, MI 4830	3-0200		
ITEM 2.					
	(a)	Name of Person Filing Stichting Pensioenfonds vo Geestelijke en Maatschap			
	(b)	Address of Principal Busin	ness Office or, if none	, Residence	
		Kroostweg-Noord 149			
		P.O. Box 117			
		3700 AC Zeist			
		The Netherlands			
	(c)	Citizenship			
		The Netherlands			
	(d)	Title of Class of Securit.	ies		
		Common Stock, \$.01 par va	lue per share		
	(e)	CUSIP Number			
		876664103			
ITEM 3.		IF THIS STATEMENT IS FILED PURSUANT TO RULE $13D-1(B)$, OR $13D-2(B)$, CHECK WHETHER THE PERSON FILING IS A:			
	(b)	 Broker or Dealer regination Bank as defined in Second Second	ction 3(a)(6) of the Ac	:t	

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- (d) [] Investment Company registered under Section 8 of the Investment Company Act
- (e) [] Investment Adviser registered under Section 203 of the Investment Advisers Act of 1940
- (f) [] Employee Benefit Plan, Pension Fund which is subject to the provisions of the Employee Retirement Income Security Act of 1974 or Endowment Fund; see ss.240.13d-1(b)(1)(ii)(F)
- (g) [] Parent Holding Company, in accordance with ss.240.13d-1(b)(ii)
 (G) (Note: See Item 7)
- (h) [] A savings association as defined in section 3(b) of the Federal Deposit Insurance Act
- (i) [] A church plan that is excluded from the definition of an investment company under section 3(c)(14) of the Investment Company Act of 1940
- (j) [] Group, in accordance with ss.240.13d-1(b)-1(ii)(J)

ITEM 4. OWNERSHIP

Provide the following information regarding the aggregate number and percentage of the class of securities identified in Item 1.

- (a) Amount Beneficially Owned 2,552,000
- (b) Percent of Class 5.002%
- (c) Number of shares as to which such person has:
 - (i) sole power to vote or to direct the vote
 - (ii) shared power to vote or to direct the vote

2,552,000

- (iii) sole power to dispose or to direct the disposition of $$\rm 0$$
- (iv) shared power to dispose or to direct the disposition of 2,552,000

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ITEM 5. OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following (.

ITEM 6. OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON

None

ITEM 7. IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY

Not applicable.

ITEM 8. IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP

Not applicable.

ITEM 9. NOTICE OF DISSOLUTION OF GROUP

Not applicable.

ITEM 10. CERTIFICATION

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purposes or effect.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this Statement is true, complete and correct.

Dated: September 10, 2001

Stichting Pensioenfonds voor de Gezondheid, Geestelijke en Maatschappelijke Belangen

By /s/J.H.W.R. van der Vlist

Name: J.H.W.R. van der Vlist Title: Director of Real Estate