

FILE NOW: FILING FEE IS \$61.25

FILED

May 20 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 700116 (7)

1. Corporation Name

THE CHARLES A. DANA, LAW CENTER FOUNDATION, INC.

Principal Place of Business

Mailing Address

1401 61ST STREET SOUTH
ST PETERSBURG FL 337071401 61ST STREET SOUTH
ST PETERSBURG FL 33707-32463. Date Incorporated or Qualified
11/04/19593a. Date of Last Report
08/01/1996

2. Principal Place of Business

2a. Mailing Address

21

2a

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-6135559

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. 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

ESTENES, JOSEPH, JR.
1401 61ST ST SO
ST. PETERSBURG FL 33707

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	TD	☐ DELETE
NAME	STEINHARDT, RAPHAEL	
STREET ADDRESS	2750 NORTHEAST 187TH ST.	
CITY - ST - ZIP	NORTH MIAMI BCH. FL	

1.1 TITLE	Steinhardt, Raphael	☐ Change ☐ Addition
1.2 NAME	2750 Northeast 187th St.	
1.3 STREET ADDRESS	North Miami Bch. FL	
1.4 CITY - ST - ZIP	td	

TITLE	PD	☐ DELETE
NAME	GRAVES, TOM	
STREET ADDRESS	1101 PASADENA AVE S., SUITE 1	
CITY - ST - ZIP	ST. PETERSBURG FL	

2.1 TITLE	PD	☐ Change ☐ Addition
2.2 NAME	Graves, Tom	
2.3 STREET ADDRESS	1101 Pasadena Ave. S., Suite 1	
2.4 CITY - ST - ZIP	St. Petersburg, FL	

TITLE	SD	☐ DELETE
NAME	CHRIST, CHARLES	
STREET ADDRESS	3085 9TH ST N	
CITY - ST - ZIP	ST. PETERSBURG FL	

3.1 TITLE	SD	☐ Change ☐ Addition
3.2 NAME	Christ, Charles	
3.3 STREET ADDRESS	3085 9th St. N.	
3.4 CITY - ST - ZIP	St. Petersburg, FL	

TITLE	RA	☐ DELETE
NAME	ESTENES, JOSEPH J.	
STREET ADDRESS	1401 61ST. ST. SO.	
CITY - ST - ZIP	ST. PETERSBURG FL	

4.1 TITLE	RA	☐ Change ☐ Addition
4.2 NAME	Estenes, Joseph J.	
4.3 STREET ADDRESS	1401 61st St. S.	
4.4 CITY - ST - ZIP	St. Petersburg, FL	

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0050340

04/30/97 (813) 5627805

CP2E037 (9/96)