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Feb 10 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 # 701371 (7)
1. Corporation Name
THE LOUIE R. AND GERTRUDE MORGAN FOUNDATION, INC



Principal Place of Business Mailing Address
218 SOUTH POLK AVENUE 218 SOUTH POLK AVENUE
ARCADIA FL 33821 ARCADIA FL 34266-3820

3. Date Incorporated or Qualified 08/29/1960
3a. Date of Last Report 06/04/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-6142359 Applied For Not Applicable
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 Zip Country 29 Zip Country 30 Zip Country
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
SUMMERALL, JR., ROBERT L.
218 SOUTH POLK AVE.
ARCADIA FL 33821
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD MIXON, BOBBY C 1.1 TITLE
NAME 1500 SE REYNOLDS ST 1.2 NAME
STREET ADDRESS ARCADIA FL 1.3 STREET ADDRESS
CITY-ST-ZIP 1.4 CITY-ST-ZIP
TITLE SD WIERICHS, JAMES R. 2.1 TITLE
NAME 3684 TARO PLACE 2.2 NAME
STREET ADDRESS SARASOTA FL 2.3 STREET ADDRESS
CITY-ST-ZIP 2.4 CITY-ST-ZIP
TITLE D BELLAMY, GEORGE E 3.1 TITLE
NAME 21 RIO VISTA RD 3.2 NAME
STREET ADDRESS ARCADIA, FL 00000 3.3 STREET ADDRESS
CITY-ST-ZIP 3.4 CITY-ST-ZIP
TITLE VTD SUMMERALL, ROBERT L JR 4.1 TITLE
NAME 2418 SE AIRPORT RD 4.2 NAME
STREET ADDRESS ARCADIA FL 4.3 STREET ADDRESS
CITY-ST-ZIP 4.4 CITY-ST-ZIP
TITLE 5.1 TITLE
NAME 5.2 NAME
STREET ADDRESS 5.3 STREET ADDRESS
CITY-ST-ZIP 5.4 CITY-ST-ZIP
TITLE 6.1 TITLE
NAME 6.2 NAME
STREET ADDRESS 6.3 STREET ADDRESS
CITY-ST-ZIP 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: Robert L. Summerall, Jr. 2-4-97 901 494-1557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0063059

CR2E037 (9/96)