FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # 755735 EN FOUNDATION, INC.	5 (8)				
Principal Place	e of Business	Mailing Address				
% Frances D. Thomsen 1941 W. Oakland Rark Blyd. Ft Lauderdale Fl 33311		% Frances D. Thomsen 1941 W. Oakland Rark Blvd. Ft Lauderdale Fl 33311-1519				
					3. Date Incorporated or Qualified 12/31/1980	3a. Date of Last Report 05/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2070983	Applied For	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable \$8.75 Additional	
2		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Flection Campaign Financing	\$5.00 May Be	
Zip	Country	28 Zip	Count	n/	Trust Fund Contribution	Added to Fees
24	25	29	30	' '	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes XINo
	9. Name and Address of Curren				10. Name and Address of New Reg	
			8	1 Name		
THOMSEN, FRANCES D.			8:	2 Street Add	Address (P.O. Box Number is Not Acceptable)	
	OAKLAND PARK BLVD. UDERDALE FL 33311		83.			
TONI EA	ODENDALE PE 33311					
			8	4 City		FL 85 Zip Code
11. Pursuant t office or re agent. I ar	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 617.1508, Florida Statu of Florida. Such change was ations of, Section 617.0503, F	utes, the abo s authorized b Florida Statute	ve-named cor by the corpora es.	poration submits this statement for the pation's board of directors. I hereby accep	
SIGNATURE _	Signature, lyped or printed name of registered age	ol and the Mannhaphie	OII Besidend A		ured when reinstating)	
12.	OFFICERS AND DIRECTORS		13.	gent signature requ	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
TITLE	PTD DELETE		1.1 TITLE			☐ Change ☐ Addition
NAME	THOMSEN, CARL J	_	1.2 NAME			
STREET ADDRESS	1941 W OAKLAND PARK BLVI)	1.3 STREE	ET ADDRESS		
CITY-ST-ZIP TITLE	FT LAUDERDALE, FL 00000 SD	DELETE	1.4 City- 2.1 Title			Channa Maddin
NAME	THOMSEN, FRANCES	L. DELLIE	2.1 HILE 2.2 NAME			L Change L Addition
STREET ADDRESS	1941 W OAKLAND PARK BLVI	D		ET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		2. 4 CITY			
TITLE	VO	DELETE	3.1 TITLE			Change Addition
NAME	THOMSEN, NANCY L	_	3.2 NAME			
STREET ADDRESS	1941 W OAKLAND PARK BLVI FT LAUDERDALE FL	J		ET ADORESS		
CITY-ST-ZIP TITLE	FI LAUDERDALE FL	DELETE	3.4 CITY 4.1 TITLE			Change Addition
NAME		C OFFEIG	4.1 HILE 4.2 NAM			Change Addilion
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			54 CITY-	ST-ZIP		
TITLE		DELETE	61 TITLE	•		Change Addition
NAME ATREET ARRESTOR			6.2 NAME	į		
STREET ADDRESS			6.3 STREE	T ADDRESS		

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 logal effect as it 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.

FILED

May 14 1997 8:00am

Secretary of State