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Jan 28 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 # F94000005841 (1)

1. Corporation Name

INNOVATING WORTHY PROJECTS FOUNDATION, INC.



Principal Place of Business

Mailing Address

LAKEVIEW CORPORATE CENTER  
6415 LAKE ROAD SUITE 208  
GREENACRES CITY FL 33463

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6415 LAKE ROAD SUITE 208  
GREENACRES CITY FL 33463

3. Date Incorporated or Qualified  
11/10/1994

3a. Date of Last Report  
03/21/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

22-6083636

Applied For

Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

25 Country

28 Zip

30 Country

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

PACKER, IRVING W DR  
LAKEVIEW CORPORATE CENTER  
6415 LAKE WORTH ROAD, SUITE 208  
GREENACRES CITY FL 33463

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 PT  DELETE  
NAME MCAFFEE, JOHN A CLU  
STREET ADDRESS PO BOX 662 (N/A)  
CITY-ST-ZIP MARLTON NJ 08053

1.1 TITLE T  Change  Addition  
1.2 NAME STEPHEN P. WEISS, ESQ.  
1.3 STREET ADDRESS 2000 MARKET STREET, 10th FLOOR  
1.4 CITY-ST-ZIP PHILADELPHIA, PA 19103-3293

TITLE TT  DELETE  
NAME CULBERTSON, RICHARD W JR  
STREET ADDRESS 601 WHITE HORSE ROAD  
CITY-ST-ZIP VOORHEES NJ

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE T  DELETE  
NAME CRABTREE, DAVID E  
STREET ADDRESS 28 COOLIDGE AVENUE  
CITY-ST-ZIP WEST CALDWELL NJ 07006

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE T  DELETE  
NAME PACKER, EDWARD D.O.  
STREET ADDRESS 2643 SOUTH LOS ALTOS  
CITY-ST-ZIP MESA AZ 85202

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE TVC  DELETE  
NAME PACKER, ESTELLE  
STREET ADDRESS 8096 DESMOND DRIVE/ABERDEEN ESTATES  
CITY-ST-ZIP BOYNTON BEACH FL 33437

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

TITLE TC  DELETE  
NAME PACKER, IRVING W ED.D  
STREET ADDRESS 8096 DESMOND DRIVE/ABERDEEN ESTATES  
CITY-ST-ZIP BOYNTON BEACH FL 33437

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:

*Irving W. Packer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IRVING W. PACKER

1/14/97 (561) 439-4445

Date Daytime Phone # 007022

CR2E037 (9/96)