FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1997 8:00am

Secretary of State

(904) 676-1051 Daytime Phone #0002075

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N17610

(9)

LIVING GIFTS FOUNDATION OF THE COUNCIL ON AGING OF VOLUSIA COUNTY, INC.

Edward Pollock

Principal Pla	ice of Busines	SS	Mailing Address					T I TEGUTION BET 11017 YOU'D ONES! THOU ONLY BIRN OLD IT BY BY BY OLD IT BY				
C/O GAIL CAM	MICHADO		C/O GAIL CAMPUTARO									
160 N BEACH			PO BOX 671									
DAYTONA BEA				DAYTONA BEACH FL 32115-0671 US				2 Data language de Continue	10- 6			_
US			US					3. Date incorporated or Qualified 3a. Date of Last Report 01/29/1996				
	Place of Busi	ness	2a. Mailing Address					4. FEI Number Appli			ppli ed For	
21			26					59-2785991 Not Applicable				
Suite, Api	t. #, etc.		Suite, Apt. #, etc.	F-7				5. Certificate of Status Desired	X		Additional Regulred	
City & Sta	ate		City & State	City & State				6. Election Campaign Financing	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$5.00) May Be	
23		Ţ	28					Trust Fund Contribution Added to Fees				
Zip		Country	Zip	Country				8. This corporation has liability for			s. 199.032,	
24	o Name	25 and Address of Cui	29 rrent Registered Agent	Agent 30				Florida Statutes				
	9, 1101110	TOTAL PROPERTY OF CALL	Hell Hegistered Ageth		81	N	lame	10, Namo and Addies of New He	<u> </u>	Agoin		ᅥ
CAMPUTARO, GAIL F.								ress (P.O. Box Number is Not Acceptat	ole)		····	
160 N B	BEACH ST			83				(4
DAYTON	va Beach F	rL 32114			0,5							
					84	C	Dity	,	FL	_ 85 Zip	Code	
11. Pursuan	it to the provis	sions of Sections 617,	.0502 and 617.1508, Florida Stat	tutes, the	above)-n	amed corp	poration submits this statement for the ption's board of directors. I hereby acception	urpose o	of changing	its registered	ΞŢ
agent I	am familiar w	with, and accept the ol	bligations of, Section 617.0503, i	Florida S	Statutes	; u)	e corporat	norts board of directors, I hereby accep	n ne ab	pointment a	s registereo	
SIGNATURE	Slagatur bass	d or printed name of registerer	of exact and tile it emplicable. All	IOTE: Boole	lared Ane	ol e	innotuse recul	red when reliestating)	DATE			-
12.	Signatore, types		AND DIRECTORS		3.	. 11 15	Paratitie redo	ADDITIONS/CHANGES.TO OFFIC		D DIRECTO	RS IN 12	
TITLE	PD	377.102.10	DELETE		1 TITLE		T			Change	Addition	'n
NAME	1	K, EDWARD			2 NAME							
STREET ADDRESS	I	TAW TRAIL		1.	3 STREET	ADI	DRESS					١
CITY-ST-ZIP		D BEACH FL		1.	4 CITY-S	T-2	IP					
TITLE	VD		DELETE		1 TITLE	<u> </u>				X Change	Addition	m .
NAME	FITZER,	GARY A		2.	2 NAME							i
STREET ADDRESS		IDGEWOOD AVE		2	3 STREET	ADI	DRESS	22 Lake Vista Way				
CITY-ST-ZIP	DAYTON	BEACH FL		2	4 City-8	SY - 2		Ormond Beach, FL				
TITLE	SD		☐ DELETE	3.	1 TITLE					Change	Addition	'n
NAME	ZINER, A	ANTHONY		3.	2 NAME							
STREET ADDRESS	5 154 SEA	HAWK DR		3.	.3 STREET	ADE	DRESS					
CITY-ST-ZIP	DAYTON	IA BEACH FL		3.	.4. CITY - S	ST - 7	ZIP					
TITLE	TD		DELETE	4.	.1 TITLE					Change	Additio	'n
NAME		(, MARJORIE		4.	2 NAME							
STREET ADDRESS	6 42 S PEI	ninsula dr		4.3 SI			Dress	220 S. Ridgewood Aver	iue			
CITY-ST-ZIP	DAYTON	ia beach fl		4.	4 CITY-S	T-2	!IP	Daytona Beach, FL				
TITLE			☐ DELETE	5.	.1 TITLE					Change	Addition	'n
NAME					2 NAME		-					
STREET ADDRESS	S (5.	.3 STREET	ADI	DRESS					ļ
CITY-ST-ZIP			T Art ree		4 CITY-S	7-2	NP .			T ALLES	4.340	
TITLE			DELETE		1 TITLE		- }			Change	Addition	n
NAME					.2 NAME							
STREET ADDRESS	S				.3 STREET							
CITY-ST-ZIP	oby post-fit the	at the information are	poled with this files does not as-		4 CITY-S			d in Section 119.07(3)(i), Florida Statute	o (diseth	or partiful the	il the	
informal	tion indicated	on this annual report	l or supplemental annual report is	is true ar	id accu	ırát	te and that	t my signature shall have the same legs	al effect e	as if made u	nder oath: th	at
I am an appears	officer or dire s in Block 12 (ector of the corporation or Block 13 if change	on or the receiver or trustee empord, or on an attachment with an a	owered (address.	10 exec	ute	e this repoi	rt as required by Chapter 617, Florida 5	itatutes;	and that my	namė	