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

DOCUMENT # 1. Corporation Name

N42977

(1)

ALLIANCE FOR INTERNATIONAL REFORESTATION, INC.

Principal Place of Business			Mailing Address				T 1001/101 Tot didne tidne tolin tolin tolin trans esert didn didn didn tidet didn 1001					
C/O ANNE HAI STETSON UNIV DELAND FL 32	Versity. 421 i	STETSON	C/O ANNE HALLUM STETSON UNIVERSITY, 421 N. WOODLAND BLVD. DELAND FL 32720									
			PENNY	Amenge of the Assessed				3. Date Incorporated or Qualified			Report 996	
2. Principal P	lace of Busine	ess	2a. Maitir	2a. Maiting Address				4. FEI Number	244	· · · · · · · · · · · · · · · · · · ·	A	pplied For
21		***************************************	26					59-3062	311			lot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					5. Certificate of Sta	atus Desired			Additional lequired
City & State			City & State				6 Circles Common	ina Financia			` . ' 	
23	G		28	<u>├</u> ¬ '				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country			Zip Country				8. This corporation has liability for intangible tax under s. 199.03				*** ***********
24		25	29		30			Florida Statutes] No	
	9. Name i	and Address of Current	Registered	Agent		81 Name		10. Name and Add	ress of New Re	pistered A	gent	
		45014450 1114				Name	,					
PALMETTO CHARTER SERVICES, INC.						82 Street	Addres	ss (P.O. Box Number	is Not Acceptab	le)		
	GNOLIA AVI					83				,		
DATIU	na Beach i	-L 32014							· · · · · · · · · · · · · · · · · · ·			
						84 City				FL	85 Zip	Code
11. Pursuant	to the provision	ons of Sections 617.0502	and 617.150	8, Florida Statu	ites, the at	ove-name	d corpor	ration submits this st	atement for the p		 changi∩g	ts registered
office or r agent. I a	egistered age m familiar wit	ons of Sections 617.0502 int, or both, in the State in, and accept the obliga	of Florida. Sud itions of, Secti	ch change was on 617.0503, F	authorized Iorida Stat	i by the cou utes.	rporatio	n's board of directors	s. I hereby accep	t the appo	ointment as	registered
SIGNATURE .	Claratura burned a	or printed name of registered ager	at and little if applies	thic thic	TE Doglobere	Acont aigeat	es soo dad	when reinstating)		DATE		
12.	Signatore, typeo t	OFFICERS AND		<u></u>	13.	O POOR & SUPPLIES	e requied	ADDITIONS/CHA	NGES TO OFFIC		DIRECTO	RS IN 12
TITLE	DP			DELETE	1.1 TI	LE	1	7			Change	Addition
NAME	WUNDER	RLICH, CHRISTOPHE	R		1.2 N/	ME	1					
STREET ADDRESS	RAINBO	w RM, 7th Avenida	SUR, #8		1.3 \$1	REET ADDRESS	:					
CITY-ST-ZIP	ANTIGU	A GU			1,4 CI	TY-ST-ZIP						
TITLE	CTS			☐ DELETE	2.1 TI	LE					Change	Addition
NAME	HALLUM				2.2 N/	ME						
STREET ADDRESS		OODLAND BLVD				REET ADDRESS						
CITY-ST-ZIP	DELAND	<u>FL</u>		DELETE		TY-ST-ZIP		- 1 M			Observe	Addition
TIFLE	-040CV-	-IOOESIA		☐ DELETE	3.1 Ti	4	ט, ונ	i soun I	layne.		Change	Addition
NAME	≃9A9EK;		_		3.2 N/		Un	irensity of Oq Expen	Georgia	•		
STREET ADDRESS	DELAND	<u>ENWOOD HAMMOCI</u>	`			REET ADDRESS	1 11	09 Expen	med 5th	reet		
CITY - ST - ZIP TITLE	DV	75-	*******	DELETE	4.1 TI	TY-ST-ZIP	 G-	rittin, c	errala	***************************************	Change	Addition
NAME		ANDRES			4.2 N		1	• /	1, -		and Average	
STREET ADDRESS		NIDA, 18-48				riet address	.					
CITY-ST-ZIP	GUATEA	IALA CITY, GUATE				11261 ADD 1233 TY-ST-ZIP						
TITLE	D			DELETE	5.1 TI		 				Change	☐ Addition
NAME	WOOD.	RICHARD			5.2 NA	ME						
STREET ADDRESS		VOODLAND BLVD.			5.3 \$1	REET ADDRESS	;]					
City-St-ZIP	DELAND	FL			5.4 CI	TY-ST-ZIP						
TITLE				DELETE	6.1 TI	TLE	Ď	۸ ۵	1.6. 6		Change	■ Addition
NAME					6.2 N	ME	Ca	indace L	an Ktord			
STREET ADDRESS					6.3 ST	REET ADDRESS	La	indace L Ke Winne	miselt L	<i>prive</i>		
CITY-ST-ZIP			June and the	- dans		TY-ST-ZIP		e Land	701'1 <i>0a</i>			
 14. I do herel informatio 	by certify that on indicated o	the information supplied in this angual report or si	with this filin- upplemental a	g does not qua innual report is	inty for the true and t	exemption sccurate an	stated in nd that m	in section 119\07(3)(i ny signature shall ha), Florida Statute: ve the same lega	s. I turther I effect as	oertity that if made u	it the nder oath; tha
I am an o	fficer or directin Block 12 or	the information supplied in this angual report or sit tor of the corporation or Block 13 if changed, or	the receiver of	r trustee empo	wered to s	xecute this	report i	as required by Chap	ter 617, Florida S	tatutes; ar	nd that my	name
uppears	DIOON TE UI]/)	. a. k.a.a.s.	A.	ı'n	11 112	1/	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
SIGNAT	URE: Z	mod!	1/4/	Will!	WHY	thne	11	, 17a114m	1/	ンゲー	91	
	•	/ SIGNATURE AND TYPED OR	PRINTED NAME C	F SIGNING OFFICE	R OR DIRECT	OR		=	Date	- 🔪 Da	vitine Mnone #	0077744

FILED Feb 04 1997 8:00am Secretary of State

