FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N46813

THE BANKS FOUNDATION, INC.

Principal Place of Business

1211 S. MILITARY TRAIL DEERFIELD BEACH FL 33442-7632

2. Principal Place of Business

Mailing Address

2a. Mailing Address

1211 S. MILITARY TRAIL DEERFIELD BEACH FL 33442-7632

FILED Apr 12, 1999 8:00 am § Secretary of State

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* 3 14844 - 90005 - 38 4 *



3. Date Incorporated or Qualifed

21			26	3 · · · · · · · · · · · · · · · · · · ·				01/14/1992					
Suite, Apt. #, etc.				Suite, Apt. #, etc.				4. FEI Number			App	ied For	
22				27				65-0308530			Not	Applicable	
City & State				City & State				5. Certifcate of Status Desired	sired S8.75 Additional Fee Required				
Zip	2	Country	29	Zip Country				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
24 25 29 3 9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent					
	1401110 41	ia riodicos di cano				81	Name					-	
DANKS DAME D							<u> </u>	A CO C Day New York and Accordable)					
BANKS, DAVID P							Street Addr	Address (P.O. Box Number is Not Acceptable)					
1211 S MILITARY TR						83			· ·			-	
SUITE 200								•				4-	
DEERFIELD FL 33442						84 City				85 Zip Code			
11. Pursuant	to the provision	ns of Sections 617.05	02 and 6	17.1508, Florida Statu	ites, the a	bove	-named corp	oration submits this statement for the	purpose of	changi	ng its r	egistered	
office or r	registered ager	it, or both, in the State	of Florid	da. Such change was	authorize	ו עט נ	he corporation	on's board of directors. I hereby acce	ot the appoir	ntment	as reg	stered	
=	ım ıamınar with	, and accept the obliga	ations of	, Section 617.0503, FI	Olida Siai	utes.							
SIGNATURE	Signature, typed or	printed name of registered age	rit and title	if applicable. (NOT	E: Registered	Agent	signature required	d when reinstating)	DATE				
12.	OFFICERS AND DIRECTORS							ADDITIONS/CHANGES TO OF	FICERS AN				
TITLE	D	DELETE				1.1 TITLE				☐] Ch	ange	☐ Addition	
NAME	BANKS, DA	VID P.			12 N	AME.							
STREET ADDRESS	1211 S MIL	ITARY TRAIL			1.3 \$	REET	ADDRESS						
CITY-ST-ZIP	DEERFIELD	BEACH FL			1.4 C	TY-ST	-ZIP				·		
TITLE	D			☐ DELETE	2.1 T	TLE				☐ Ch	ange	Addition	
NAME	BANK, MAL	VIN E.			2.2 N	AME		•					
STREET ADDRESS 3900 SOCIETY CENTER, 127 PUBLIC SQUARE						TREET	ADDRESS	_					
CITY-ST-ZIP	CLEVELAND				2.40	1TY-S1	r- ZIP		<u> </u>				
TTLE	D.			☐ DELETE	3.1 T	TLE				☐] Ch	ange	☐ Addition	
NAME	SPECTOR,	MARTIN C.			3.2 N	AME							
STREET ADDRESS		SSY PKWY.			3.3 S	TREET	ADDRESS						
CITY-ST-ZIP	AKRON OH				3.4. 0	ITY-S1	r-ZIP						
TITLE	,			☐ DELETE	4.1 T	TLE				Ch	ange	Addition	
NAME		٠			-4.21	IAME							
STREET ADDRESS					4.3 S	TREET	ADDRESS						
CITY-ST-ZIP]				4.4 C	TY-ST	-ZIP						
TITLE				☐ DELETE	5.1 Ti	TLE '				Ch	ange	Addition	
NAME					5.2 N	AME							
STREET ADDRESS					5.3 S	TREET	ADDRESS						
CITY-\$T-ZIP					5.4 C	TY-81	-ZIP						
TITLE C'	27. 77. 7			☐ DELETE	6.1 T	TLE				Ch	ange	☐ Addition	
NAME 3.3 13	1				62 N	AME			•				
STREET ADDRESS		•			6.3 S	TREET	ADDRESS						
CITY-ST-ZIP	•				6.4 C	TY-ST	-ZIP						
	certify that the	information supplied w	ith this f	iling does not qualify f	or the exe	motic	on stated in S	Section 119.07(3)(i). Florida Statutes.	I further cer	tify that	the in	ormation	

Interest certay that the information supplied with this shing does not quality for the exemption stated in Section 119.07(5/ft), Fiorida Statutes. Indicated the control of the control of

SIGNATURE:

RE REQUIRED

954) 480-2611