FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	1998	1000 000	DIVISION OF CORPORATIONS					Secretary of State				
DOCU 1. Corporation	MENT on Name	# N4980	1 (6)				500	n Cta	ry O	ΙSί	acc	
THF V	AUGHN-J	ORDAN FOUNDAT										
1716-1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ondrie i Coledati										
Principal Place of Surinces												
Principal Place of Business Mailing Address										· · · · · · · · · · · · · · · · · · ·		
1900 PHILLIPS POINT WEST 1900 PHILLIPS POINT WEST 777 SOUTH FLAGLER DRIVE 777 SOUTH FLAGLER DRIVE								3. Date incorporate	d or Qualified	i		
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33								07/08/199	2			
								4. FEI Number 65-036299	19			Applied For Not Applicable
2. Principal F	Place of Busin	ess	2a. Mailin	2a. Mailing Address				5. Certificate of Stat				Additional
21 Suito Ant	# 010		26								,	Required
Suite, Apt.	. #, etG.			Suite, Apt. #, etc.				Election Campaig Trust Fund Contri		П		May Be
City & Stat	te			City & State				Trust Fund Contribution				
23			28					☐ Yes X (No				
Zip 24		Country	Zip		Countr	У		8. This corporation of				
24	9. Name	25 and Address of Curren	29 It Registered A	gent	30			Personal Property 10. Name and Addre				∐ No
				· · · · · · · · · · · · · · · · · · ·	81	Name				Oglotor Cu 7	-gont	
WATT, J	IAMES L.				82	Street	t Addres	s (P.O. Box Number is	Not Accents	hle)		
777 SOUTH FLAGLER DRIVE								o (r :o: box radriber s	110t Accepte	Die)		
1900 PHILLIPS POINT WEST						i						
WEST PALM BEACH FL 33401						City			·		85 Zip	Code
11. Pursuant	to the provisi	ons of Sections 617.050	2 and 617.1502	3. Florida Statut	es, the abov	e-pamer	d corpora	ation submits this state	ment for the	Purpose of	changing	ite registered
office or r	registered ag	ons of Sections 617.050; ent, or both, in the State h, and accept the obliga	of Florida, Such	n change was a	authorized b	y the co	rporation	's board of directors.	hereby acce	opt the appo	ointment as	s registered
SIGNATURE												
12.	Signature, typed	or printed name of registered ager OFFICERS AND		ile. (NOTI		ent signatur	re required v	when reinstating)	OFO TO OFF	DATE	DIDEOTO	5011116
TITLE	D	OFFICENS AND	DINECTORS	DELETE	13.		1	ADDITIONS/CHAN	SES TO OFF		Change	RS IN 12
NAME	1 -	, CLARENCE R. JR.		1.2 NAMI SE 1.3 STRE 1.4 CITY-			VAU	Vaughn, Clarence e, Jr 2150 Miller Chapel Road				Acculou
STREET ADDRESS	ROCKDA	LE COUNTY COURTH	ISE				21	150 MILLER CHAPEL ROAD				
CITY-ST-ZIP	CONYER	S GA					රා	NYERS, GA	300			
TITLE	D	141150 1 10		☐ DELETE	2.1 TITLE 2.2 NAME					,	Change	Addition
NAME CORRECT ADDRESS	VAUGHN, JAMES A JR. 9340 BALADA STREET											
STREET ADDRESS CITY-ST-ZIP	CORAL C	2.3 STREET										
TITLE	D	A COLLEGI E		DELETE	2. 4 CITY- 3.1 TITLE	51-ZIP	 				• Change	Addition
NAME	WATT, JA	AMES L.			3.2 NAME					•		
STREET ADDRESS		TH FLAGLER DR., 19	00		3.3 STREET	ADDRESS						
CITY-ST-ZIP		LM BEACH FL			3.4. CITY-	ST-ZIP						
TITLE	D	C DOLAND III		☐ DELETE	4.1 TITLE		L.P.	ight, c. Ro	V 041N 1		Change	Addition
NAME STREET ADORESS		, C. Roland III Ott street, se			4. 2 NAME		3.0	45 Miller	CHAPE	L. RoA	Ð	
STREET ADDRESS CITY-ST-ZIP	CONYER				4.3 STREET			NYERS, GA				
TITLE	D	5 G.(DELETE	5.1 TITLE	H-ZIP	D	No ACKES! GA	20,00		Change	Addition
NAME	VAYGHE	N, JAMES P. DR.			5.2 NAME		VAU	GHN , JAM	es P.,			
STREET ADDRESS 3328 SWANSEE STREET					5.3 STREET ADDRESS			0 Westfie	ld Drii	ر ما		
CITY-ST-ZiP	DURHAM	NC		T-1	5.4 CITY - S	T-ZIP	DU	PHAM, NO	27	105		
TITLE			ļ	☐ DELETE	6.1 TITLE			•		Ţ	Change	☐ Addition
NAME					6.2 NAME	1000						ļ
STREET ADDRESS					6.3 STREET	AUUKESS	1					1

14. I 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:

8, 1998 5616507200

FILED

Feb 03 1998 8:00am