## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	N92000000714	<b>(7)</b>

RICHARD AND JANE GREEN FAMILY FOUNDATION, INC.												
	· ·											PHIN <b>o</b> h Phin Hari
Principal Place of Business Mailing Address									I TO DIALET PIR IRITE TRAIL FORM BRITING			
20 HARBOU			20 H	HARBOUR HOUSE								
OCEAN REE KEY LARGO				An Reef Club Largo FL 33037								
N=7 = 11.00			US	ENNOO FE 33037					3. Date incorporated or Qualified	3a. Da	e of Last	Report
3 Principal C	Place of Business		T2						12/08/1992		03/08/1	995
2. Frincipal P	race of Business		2a. Ma	aiting Address					4. FEI Number 65-0377179			Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc.							05-0517 179			Not Applicable		
27							5. Certificate of Status Desired		,	Additional Required		
City & State City & State							6. Election Campaign Financing			O May Be		
23 Zin			28						Trust Fund Contribution			d to Fees
Zip 24	25	Country	Zip	)		ıntry			8. This corporation has liability for int			199.032,
24		d Address of Current	29 Registere	ed Agent	30	<del></del>	<del></del> -		Florida Statutes  10. Name and Address of New Reg	Yes 🔲		
T-11.						81	Name		IV. Halle and Address of New He	gistereo A	gent	<del></del>
GREEN.	RICHARD D				i	-	_					
	<b>BOUR HOUSE</b>					82	Street A	Address	s (P.O. Box Number is Not Acceptable)	}		
	REEF CLUB					83						1
KEY LAI	RGO FL 33037					84	City			——————————————————————————————————————	les l	Code
51 Durauant	to the providence	-10-4					-			FL	1 1 .	o Code
or register	to the provisions red agent, or both	of Sections 617.0502 a h, in the State of Florida	ind 617.15 Such cha	.08, Florida Statutes ange was authorized	, the abo I by the c	ve-na corpc	amed cor oration's t	rporation board o	on submits this statement for the purpo of directors. I hereby accept the appoin	se of char	ging its r	egistered office
	ith and accept the	e obligations of Sectio	n 617.0500	3, Florida Statutes.	-	-						agon, ran
SIGNATURE .	Signature, typed or prir	nted name of registered agent an	id title if epplica	able. (NOTE	Registered	Agent	signature rec	or lited with	en reinstaling)	<u>3~13</u>	~96	
12.		OFFICERS AND			13.	-	0 g ~	que po a	ADDITIONS/CHANGES TO OFFICE	ERS AND I	DIRECTO	RS IN 12
TITLE	D			DELETE	1.1 111	TLE					] Change	Addition
NAME	GREEN, RIC			<del>-</del>	1.2 NA	AME					-	i
STREET ADDRESS		JR HOUSE, OCEAN	REEF U	LUB			ADDRESS					
CITY-ST-ZIP TITLE	KEY LARGO	) FL 3303/	<del></del>	DELETE		TY-ST	- ZIP					
NAME	GREEN, JAI	NE S		Precess	2.1 TIT 2.2 NA					L	] Change	Addition
STREET ADDRESS		JR HOUSE, OCEAN	REFE CI	HIR			ADDRESS					
CITY-ST-ZIP	KEY LARGO		Tiber v.	<b>-0</b> D	2.40		- 1					
TITLE	D			DELETE	3.1 T(T		1-TH		<u> </u>		Change	Addition
NAME	GREEN, STI			·	3.2 NA	ME				<u> </u>	, C	
STREET ADDRESS		NAHL PLACE #151	2		3.3 STI	REET A	ADORESS					
CITY-ST-ZIP	BRATENAHI	L OH 44108		<u>-</u>	3.4. Cr	TY-ST	r-ziP					
TITLE	D	***		DELETE	4.1 TIT						Change	Addition
NAME OTREET ADDRESS	GREEN, JOA	W 1	ALUTE AL		4 2 NA							
STREET ADDRESS	REACHWAY	rge ziegler dr., : DD oh 44122	SUILE	6			NDDRESS					1
CITY-ST-ZIP TITLE	DEMONITOR	JU UN 44122		DELETE	4 4 CIT		- ZIP				51	
NAME					5.2 NAI						Change	Addition
STREET ADDRESS							DDRESS					i
CITY-ST-ZIP					5.4 CIT		i					
TITLE				DELETE	6.1 TITI						Change	Addition
NAME					6.2 NA!	ME					v,g.	
STREET ADDRESS					6.3 STR	REET A	DORESS					
CITY-ST-ZIP					6.4 CIT	Y-ST-	ZIP					
eartify that	y certify that the ii	ntormation supplied with	n this filing	is voluntarily furnish	ed and d	loes	not qualif	fy for th	e exemption stated in Section 119.07	3)(k), Floric	a Statute	s. I further

4. Too needy certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 for honged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-96 305 367-2529