

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
 AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

95 SEP 20 AM 8:33

DOCUMENT # N94000000386 (2)

1. Corporation Name  
 THE CROSLY ESTATE FOUNDATION, INC.

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address  
 C/O ADVISORY COMMITTEE MEETING ROOM 1112 MANATEE AVENUE WEST BRADENTON FL  
 C/O LINDA CINQUE 101 53RD STREET NW BRADENTON FL 34209

3. Date incorporated or Qualified 01/18/1994 3a. Date of Last Report 12/28/1995  
 4. FEI Number 65-0678528 Applied For XAPPROVED FOR  
 5. Certificate of Status Desired \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip 24 Country 25 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent  
 CINQUE, LINDA  
 101 53RD STREET NW  
 BRADENTON FL 34209

10. Name and Address of New Registered Agent  
 81 Name Wallace Dunlap  
 82 Street Address (P.O. Box Number is Not Acceptable) 849 Waterside Lane  
 83 900001965759  
 84 City Bradenton -10/04/96-01105 ZIP 216 \*\*\*\*\*61.25L\*\*\*\*\*80925

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE WALLACE B. DUNLAP (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE 9-16-96

12. OFFICERS AND DIRECTORS

TITLE	DP	DELETE
NAME	HARVEY, BARBARA	
STREET ADDRESS	P.O. BOX 1222 N/A	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	DV	DELETE
NAME	DUNLAP, WALLACE B	
STREET ADDRESS	849 WATERSIDE LANE	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	DST	DELETE
NAME	BELACK, STEVE	
STREET ADDRESS	7342 SHEPHERD ST.	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	D	DELETE
NAME	RUSSELL, WILLIAM	
STREET ADDRESS	3710 18TH AVENUE WEST	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	D	DELETE
NAME	HOUGH, MARLA	
STREET ADDRESS	4161 TONGA DR.	
CITY-ST-ZIP	SARASOTA FL 34241	
TITLE	D	DELETE
NAME	PATTERSON, JOHN	
STREET ADDRESS	911 VILLAGE GREEN PKWY	
CITY-ST-ZIP	BRADENTON FL 34209	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director/Chairman	Change	Addition
1.2 NAME	Dunlap, Wallace B.		
1.3 STREET ADDRESS	849 Waterside Lane		
1.4 CITY-ST-ZIP	Bradenton, FL 34209		
2.1 TITLE	Director/1st v. Chairman	Change	Addition
2.2 NAME	Hough, Marla		
2.3 STREET ADDRESS	1101 6th Ave. W., #108		
2.4 CITY-ST-ZIP	Bradenton, FL 34205		
3.1 TITLE	Director/2nd v. Chairman	Change	Addition
3.2 NAME	Russell, William		
3.3 STREET ADDRESS	3710 18th Avenue West		
3.4 CITY-ST-ZIP	Bradenton, FL 34205		
4.1 TITLE	Director/Secretary	Change	Addition
4.2 NAME	Belack, Steve		
4.3 STREET ADDRESS	7342 Shepherd Street		
4.4 CITY-ST-ZIP	Sarasota, FL 34243		
5.1 TITLE	Director/Treasurer	Change	Addition
5.2 NAME	Patterson, John		
5.3 STREET ADDRESS	911 Village Green Pkwy		
5.4 CITY-ST-ZIP	Bradenton, FL 34209		
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do hereby 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 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 9/18/96 941-746-744