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**Apr 29 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morgham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000000131 (9)

1. Corporation Name
THE RICHARD WILBUR SOCIETY, INC.



Principal Place of Business LETTERS COLLEGIUM - ECKERD COLLEGE 4200 - 54TH AVENUE SOUTH ST. PETERSBURG FL 33711	Mailing Address LETTERS COLLEGIUM - ECKERD COLLEGE 4200 - 54TH AVENUE SOUTH ST. PETERSBURG FL 33711
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3. Date Incorporated or Qualified 01/06/1997	
4. FEI Number 59-3427163	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

**BROOKER, JEWEL S PROF
LETTERS COLLEGIUM - ECKERD COLLEGE
4200 - 54TH AVENUE SOUTH
ST. PETERSBURG FL 33711**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

FL

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P	1.2 NAME Jewel S. Brooker	1.3 STREET ADDRESS 501 68th Ave South	1.4 CITY-ST-ZIP St. Petersburg FL 33705	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE D/V	2.2 NAME Bruce Michelson	2.3 STREET ADDRESS English Dept. - University of Illinois	2.4 CITY-ST-ZIP 608 S. Wright St. Urbana, IL 61801	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE D/S/T	3.2 NAME Paul Sonnenburg	3.3 STREET ADDRESS 5111 Caroline Place NW	3.4 CITY-ST-ZIP Washington DC 20016-2525	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Jewel S. Brooker, President** *Jewel S. Brooker* **813-867-6533**

CR2E037 (10/97)