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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N97000002705

1. Corporation Name
THE SALEM FOUNDATION, INC.

Principal Place of Business: SALEM BUILDING, SUITE 100, 4600 KENNEDY BOULEVARD, TAMPA FL 33609
 Mailing Address: SALEM BUILDING, SUITE 100, 4600 KENNEDY BOULEVARD, TAMPA FL 33609



21	2. Principal Place of Business	2a	Mailing Address	3.	Date Incorporated or Qualified	
	Suite, Apt. #, etc.		Suite, Apt. #, etc.	4.	FEI Number	Applied For
22	City & State	27	City & State		59-3445283	Not Applicable
23	Zip	28	Country	5.	Certificate of Status Desired	\$8.75 Additional Fee Required
24	Country	29	Country			
		30		6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SALEM, ALBERT M JR. SALEM BUILDING, SUITE 100 4600 KENNEDY BOULEVARD TAMPA FL 33609				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SALEM, ALBERT M JR.			1.2 NAME			
STREET ADDRESS	POST OFFICE BOX 18607	N/A		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33679			1.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SALEM, TEDDY H			2.2 NAME			
STREET ADDRESS	POST OFFICE BOX 18607	N/A		2.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33679			2.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SALEM, ALBERT M III			3.2 NAME			
STREET ADDRESS	POST OFFICE BOX 18607	N/A		3.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33679			3.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SALEM, NANCY E			4.2 NAME			
STREET ADDRESS	POST OFFICE BOX 18607	N/A		4.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33679			4.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SALEM, MARY G			5.2 NAME			
STREET ADDRESS	POST OFFICE BOX 18607	N/A		5.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33679			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HAMPTON, ANNE S			6.2 NAME			
STREET ADDRESS	POST OFFICE BOX 18607	N/A		6.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33679			6.4 CITY-ST-ZIP			

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, with all other like empowered.

SIGNATURE: *Anne S. Hampton* **REQUIRED** S. Hampton 4/20/99 813 286 3000

CR2E037 (11/98)