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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # N97000004788

1. Corporation Name
THE LONDON FOUNDATION, INC.

Principal Place of Business
801 BRICKELL AVE
19TH FLOOR
MIAMI FL 33131

Mailing Address
801 BRICKELL AVE
19TH FLOOR
MIAMI FL 33131



2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)
3. Date Incorporated or Qualified (08/22/1997)
4. FEI Number (26-4362150) Applied For () Not Applicable ()
5. Certificate of Status Desired () \$8.75 Additional Fee Required
6. Election Campaign Financing () \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent
SANDSTROM, FREDERICK H
801 BRICKELL AVE
19TH FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 LONDON, R. KIRK	1.1 TITLE	
NAME	11222 QUAIL ROOST DRIVE	1.2 NAME	
STREET ADDRESS	MIAMI FL 33131	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D GASTON, GERALD N	2.1 TITLE	
NAME	11222 QUAIL ROOST DRIVE	2.2 NAME	
STREET ADDRESS	MIAMI FL 33131	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D SANDSTROM, FREDERICK H	3.1 TITLE	
NAME	801 BRICKELL AVE, 19TH FLOOR	3.2 NAME	
STREET ADDRESS	MIAMI FL 33131	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: FREDERICK H SANDSTROM 4/30/99 305-372-5005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)