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**Feb 06 1997 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P34997 (7)

1. Corporation Name
FOUNDATION FOR PUBLIC RELATIONS RESEARCH AND EDUCATION INC.



Principal Place of Business Mailing Address

UNIVERSITY OF FLORIDA
3059-3061 WEINER HALL
GAINESVILLE FL 32611-8400
US

UNIVERSITY OF FLORIDA
P O BOX 118400
GAINESVILLE FL 32611-8400
US

3. Date Incorporated or Qualified **08/07/1991** 3a. Date of Last Report **02/26/1996**

4. FEI Number **13-6161619** Applied For Not Applicable

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 Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**FELTON, JOHN W
UNIVERSITY OF FLORIDA
3061 WEIMER HALL
GAINESVILLE FL 32611**

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

12. OFFICERS AND DIRECTORS

TITLE	CT	<input checked="" type="checkbox"/> DELETE
NAME	NIELSEN, WILLARD D.	
STREET ADDRESS	ONE JOHNSON & JOHNSON PLAZA	
CITY-ST-ZIP	NEW BRUNSWICK NJ	
TITLE	PT	<input type="checkbox"/> DELETE
NAME	FELTON, JOHN W	
STREET ADDRESS	UNIVERSITY OF FLORIDA 3061 WEIMER HALL	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	GRUNIG, LARISSA	
STREET ADDRESS	UNIVERSITY OF MARYLAND	
CITY-ST-ZIP	COLLEGE PARK MD	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	BERGEN, JOHN D	
STREET ADDRESS	11 STANWIX	
CITY-ST-ZIP	PITTSBURGH PA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	Chairman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	W. Ward White
5.3 STREET ADDRESS	720 East Wisconsin Avenue
5.4 CITY-ST-ZIP	Milwaukee, WI 53202
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	\$ BANK
6.4 CITY-ST-ZIP	VB 26

14. I do 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, or on an attachment with an address.

SIGNATURE: **X John W Felton** (JOHN W FELTON) **1/1/96 512/392-0310**

DATE: _____

CR2E037 (9/96)