

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 27 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 814109 (5)

1. Corporation Name

THE MONTGOMERY FOUNDATION, INC.

Principal Place of Business

Mailing Address

C/O W.D. HAYNES
2 WISCONSIN CIRCLE, SUITE 400
CHEVY CHASE MD 20815C/O W.D. HAYNES
2 WISCONSIN CIRCLE, SUITE 400
CHEVY CHASE MD 20815-70033. Date Incorporated or Qualified
12/21/19593a. Date of Last Report
03/07/1996

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

4. FEI Number
13-6153649Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PASD
NAME LOYD, KELLY
STREET ADDRESS 11095 SW 53RD AVE
CITY-ST-ZIP MIAMI FL

DELETE

1.1 TITLE ASD
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

TITLE VSTD
NAME HAYNES, WALTER D
STREET ADDRESS 5407 SPANGLER AVE
CITY-ST-ZIP BETHESDA MD

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

TITLE D
NAME MONTGOMERY, ARTHUR
STREET ADDRESS 112 SHERIDAN AVE
CITY-ST-ZIP HO-HO-KUS NJ

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

TITLE D
NAME SMILEY, KARL
STREET ADDRESS 9979 SW 52ND AVE
CITY-ST-ZIP MIAMI FL

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

TITLE ASD
NAME LOYD, KELLY
STREET ADDRESS 11095 SW 53RD AVE
CITY-ST-ZIP MIAMI FL

DELETE

5.1 TITLE P
5.2 NAME PETER MANZ
5.3 STREET ADDRESS 2380 BAY VILLAGE COURT
5.4 CITY-ST-ZIP PALM BEACH GARDENS FL 33410

Change Addition

TITLE D
NAME BELLAMY, JEANNE
STREET ADDRESS 2718 SECOWA ST
CITY-ST-ZIP CORAL GABLES FL

DELETE

6.1 TITLE P/D
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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 if changed, or on an attachment with an address.

SIGNATURE:

Sandra B. Mortham, Secretary of State

1/15/97 301-78-8600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CP2E037 (9/96)

1997 Florida Non-profit Corporation Annual Report

**The Montgomery Foundation, Inc.
FEI Number 13-6153649**

Block 12 - New Director

Mr. Nicholas Kelly
Director
6000 S.W. 123 Avenue
Miami FL 33183
Tel 305-596-9350