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May 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **722307** (6)

1. Corporation Name

THE DR. P. PHILLIPS FOUNDATION

Principal Place of Business

Mailing Address

**60 W ROBINSON STREET
P O BOX 3753
ORLANDO FL 32802**

**60 W ROBINSON STREET
P O BOX 3753
ORLANDO FL 32802**

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

10. Name and Address of New Registered Agent

**HINSON, J.A.
60 W. ROBINSON STREET
ORLANDO FL 32801**

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	PD	<input type="checkbox"/> DELETE
NAME	HINSON, J.A.	
STREET ADDRESS	60 W ROBINSON ST	
CITY-ST-ZIP	ORLANDO FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

TITLE	ASTD	<input type="checkbox"/> DELETE
NAME	BURNETT, H.L.	
STREET ADDRESS	60 W ROBINSON ST	
CITY-ST-ZIP	ORLANDO FL	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

TITLE	EVD	<input type="checkbox"/> DELETE
NAME	SIMON, R. A.	
STREET ADDRESS	60 W ROBINSON STREET	
CITY-ST-ZIP	ORLANDO FL	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

TITLE	STD	<input type="checkbox"/> DELETE
NAME	FUREY III, E F	
STREET ADDRESS	60 W ROBINSON ST	
CITY-ST-ZIP	ORLANDO FL	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

TITLE	D	<input type="checkbox"/> DELETE
NAME	HUBBARD, L E	
STREET ADDRESS	60 W. ROBINSON STREET	
CITY-ST-ZIP	ORLANDO FL	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

TITLE	D	<input type="checkbox"/> DELETE
NAME	ROSS, THOMAS T	
STREET ADDRESS	60 W. ROBINSON STREET	
CITY-ST-ZIP	ORLANDO FL	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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.

SIGNATURE:

J. A. HINSON

4/23/98

407-422-6105

CR2E037 (10/97)

**CORPORATION ANNUAL REPORT
1998**

THE DR. P. PHILLIPS FOUNDATION

DOCUMENT #722307

BOX 12 - OFFICERS & DIRECTORS
Additional Information

7.1 D
7.2 FLETCHER JR., RICHARD L.
7.3 60 W. ROBINSON ST
7.4 ORLANDO, FL