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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

| | 1996 1 | SO ME | TEST | DIVISION OF | CORPORA | TIONS | | | | | |
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| DOCUI 1. Corporation | MENT : | [‡] 70275 | 1 | (9) | | | | | | | |
| THE FL | LORIDA BA | R FOUNDATION | I, INC. | | | | | | | | |
| | | | | | | | | | | | |
| Principal Place | e of Business | | Mailing | Address | <u></u> | - | | | | | |
| 109 F CHURC | CH STREET STI | : 406 | PO PO | X 1553 | | | | | | | |
| ORLANDO FL | | - *** | | NDO FL 32802-15 | 53 | | | | | | |
| | | | US | | | | 3. Da | ite Incorporated or Q | ualified | 3a. Date of | Last Report |
| | | | | | | | | 08/02/1961 | | | 1/1995 |
| | lace of Busines | 3 | <u> </u> | ing Address | | | 4. FE | l Number | | , | Applied F |
| Suite, Apt. : | # etc | | 26 Suite | Ant # ata | ····- | | | 59-1004604 | | | Not Appli |
| 22 | π, σιο. | | 27 | e, Apt. #, etc. | | | 5. Ce | rtificate of Status De | sired | | 3.75 Addition Fee Required |
| City & State | θ | | + | & State | | | 6. Fle | ction Campaign Fina | encina | | 5.00 May B |
| 23 | | | 28 | | | | | st Fund Contribution | - | | Added to Fees |
| Zip | - | Country | Zip | | Count | ry | | is corporation has lial | | | er s. 199.032 |
| 24 | 9 Name a | ol and Address of Curre | 29 nt Registered | Agent | 30 | | | rida Statutes | | Yes X No | |
| | J 10-11-0 MI | | , io Bistol ou | - Hann | 8 | 1 Name | | me and Address o | i wam Hağı | istelea Yâşu, | |
| CURRAN | I, JANE EKIZI | MRFTH | | | | | | Tall Kill and the second | | · | |
| | | STREET STE 405 | | | 8 | ∡ Street | : Address (P.O. E | Box Number is Not A | (cceptable) | | |
| | O FL 32801 | | | | 8 | 3 | | | | | |
| | X | | 7 | | 8 | 4 City | | | | Ī. | |
| | /\ | | į. | | ۱۰ | - City | | | | FL B5 | Zip Code |
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| 11. Pursuant to | to the provision: | s of Sections eV.0902 | 2 and 617.150 | Florida Statute | es, the above | -named c | corporation subm | nits this statement for | r the purpos | | its registered |
| 11. Pursuant t or registere familiar wit | to the provision ed agent, or bo th, and accept | s of Sections 80 0002 11. in the State of Pori 15. obligations of Section | 2 and 617.150 ida Such char tio i 617.0503, | 9, Florida Statuti ge was authoriz Florida Statutes | es, the above ed by the cor | e-named or rporation's | corporation submarks board of directed | nits this statement for ors. I hereby accept | r the purpos the appoint | | its registered ered agent. I a |
| familiar wit | th, and accept | pobligations by Section | 11N) \ | ハヘ | | | | | r the purpos the appoint | se of changing ment as regist | its registered ered agent. I a |
| familiar wit | to the provision red agent, or bo th, and accept | the obligations by sections and the sections of the section of the | | Execut | ye Dir | | required when reinstate | ing) | W Ki | se of changing ment as regist DATE | 4 199 |
| familiar wit SIGNATURE _ | th, and accept | pobligations by Section | | Execut | | ector | required when reinstate A[3] | ing) DITIONS/CHANGES | W Ki | se of changing ment as regist | 5, /59 CTORS IN 12 |
| familiar wit SIGNATURE _ 12. TITLE | Signature, type 34 | Medigal disb, son Medical Area and An OFFICERS AN | | Execut | YR. Dir. | ectar | required when reinstate ADI | ong) DITIONS/CHANGES nt | D. KV | se of changing ment as regist DATE RS AND DIRE | CTORS IN 12 |
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SIGNATURE: RESERVE BOWNER OF PROPERTY OF THE RESULTED

3/1/96 305/358-2000 Date Date Despine Proce #

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(terms expire 1998)

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