

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 706858 (8)

1. Corporation Name

PENSACOLA HERITAGE FOUNDATION INC



Principal Place of Business

410 SOUTH FLORIDA BLANCA
PO BOX 12424
PENSACOLA FL 32582

Mailing Address

410 SOUTH FLORIDA BLANCA
PO BOX 12424
PENSACOLA FL 32582

3. Date Incorporated or Qualified
02/20/1964

3a. Date of Last Report
03/15/1995

2. Principal Place of Business

2a. Mailing Address

21

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4. FEI Number
59-6159380

Applied For
Not Applicable

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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

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8. 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

WALLACE, DOROTHY K.
410 SO. FLORIDA BLANCA ST.
PENSACOLA FL 32501

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 Dorothy K. Wallace
Signature, typed or printed name of registered agent and title if applicable.

Dorothy K. Wallace
(NOTE: Registered Agent signature required when reinstating)

3/13/96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME KIEWIT, BOB PD
STREET ADDRESS Kiewit, Bob
CITY-ST-ZIP 15 W. MAIN STREET
PENSACOLA FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME SD
STREET ADDRESS CHILDS, TISH
CITY-ST-ZIP 400 WEST MALLORY
PENSACOLA, FL 32504

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

TITLE ☐ DELETE
NAME HUFFMASTER, JIM TD
STREET ADDRESS 417 E. INTENDENCIA
CITY-ST-ZIP PENSACOLA FL 32501

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

TITLE ☒ DELETE
NAME STAPLETON, CAROLYN TD
STREET ADDRESS 4635 AVONIDA MARINIA
CITY-ST-ZIP PENSACOLA FL 32504

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME VPD
4.3 STREET ADDRESS Betty Seegers
4.4 CITY-ST-ZIP 1050 Gerhardt Drive
Pensacola, FL 32503

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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:

Robert M. Kiewit
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/96
Date

(904) 434-3527
Daytime Phone

CR2E037 (12/95)