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CORPORATION
ANNUAL REPORT
1995

DOCUMENT # 714789 (5)

1. Corporation Name
EAGLES MEMORIAL FOUNDATION, INC.

Principal Place of Business	Mailing Address
MCGRIFF, THOMAS J. 4710 FOURTEENTH STREET BRADENTON FL 34207-2009	MCGRIFF, THOMAS J. 4710 FOURTEENTH STREET BRADENTON FL 34207-2009

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/18/1968	3a. Date of Last Report: 03/08/1994
4. FEI Number: 59-1463340	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status [X]	$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes [X] No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MCGRIFF,THOMAS J.
4710 14TH ST W
BRADENTON FL 34207

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	[X] Change ☐ Addition
NAME	WEBSTER, DALE E.	1.2 NAME	SPEARS, SHERM	
STREET ADDRESS	3056 COUNTRY MEADOWS	1.3 STREET ADDRESS	937 S. MULBERRY ST.	
CITY-ST-ZIP	VALLEY CITY ND	1.4 CITY-ST-ZIP	OTTAWA, KS 66067	
TITLE	VD	2.1 TITLE	VD	[X] Change ☐ Addition
NAME	CHERRY, VINCENT	2.2 NAME	WEBSTER, DALE E.	
STREET ADDRESS	5530 W. DAKIN ST.	2.3 STREET ADDRESS	3056 COUNTRY MEADOWS	
CITY-ST-ZIP	CHICAGO IL	2.4 CITY-ST-ZIP	VALLEY CITY, ND 58072	
TITLE	SD	3.1 TITLE	SD	[X] Change ☐ Addition
NAME	VALENTINE, JAES	3.2 NAME	CHERRY, VINCENT	
STREET ADDRESS	2241 MATRENA DR.	3.3 STREET ADDRESS	5530 WEST DAKIN ST.	
CITY-ST-ZIP	BEAVERCREEK OH	3.4 CITY-ST-ZIP	CHICAGO, IL 60641	
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	DI NARDO, ARCO	4.2 NAME		
STREET ADDRESS	ROAD 2, BOX 434-D	4.3 STREET ADDRESS		
CITY-ST-ZIP	CHARLEROI PA	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	MASON, W.E."BILL"	5.2 NAME		
STREET ADDRESS	912 WOODALL LANE	5.3 STREET ADDRESS		
CITY-ST-ZIP	HUNTSVILLE AL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		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 above, or on an attachment with an address.

SIGNATURE: Sherm Spears 02/21/95 913-242-6034
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
SHERM SPEARS

0062400