FILE NOW: FILING FEE IS \$61.25						¬ FILED		
NONPROFIT FLORIDA DEPAREMENT OF STATE								
	CORPORATION  ANNUAL REPORT  Secretary of State					Jan 29 1996 8:00am		
Secretary of State  1996  DIVISION OF CORPORATIONS					IONS	Secretary of State		
						- Secretar	y of St	ate
DOCUI	MENT # 71607	0	(8)					
			` '					
ABOLY	FOUNDATION, INC.					4 189101 (ARB) (CRIA BUILL BANK 1881)	BAN BIGIR BIGN BIBN GIB	I OSON OLAN MODE
Principal Place of Business Mailing Address						1 (981) (488) (1344 41) (1344 141)	AB41 m1211 A1A14 61811 A121	a Billit Billii (bai
111 MADISON ST STE 2300			111 MADISON ST STE 2000					
TAMPA FL 33602			TAMPA FL 33602			3. Date Incorporated or Qualified	3a. Date of Last	Report
US			US			02/18/1969	05/16/	
2. Principal Place of Business			2a. Mailing Address 26			4. FEI Number	- ⊢	Applied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.			23-7294195	\$8.7	Not Applicable  5 Additional
22		27				Certificate of Status Desired		Required
City & State			City & Stafe			Election Campaign Financing     Trust Fund Contribution		May Be
<b>23</b> Zip	Country	28	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,		
24	25 29 29 29 29 29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20			30		Florida Statutes Yes No  10. Name and Address of New Registered Agent		
				e	1 Name	to. Name and source of their the	- Store - Agorit	
	, Stella f			8	2 Street Add	ress (P.O. Box Number is Not Acceptable	9)	
111 MADISON STREET								
• TAMPA	FL 33602							
				8	4 City		FL 85 Z	ip Code
11. Pursuant t	to the provisions of Sections 617,050 and agent, or both, in the State of Ho	2 and 6	17.1508, Florida Statut h changu was authoriz	es, the above	named corpor	ration submits this statement for the purp rd of directors, I hereby accept the appo	oose of changing its	registered office
familiar wi	th, and accept the obligations of, Sec	tion 617	.0503 Florida Statutes	).	,	, ,		
SIGNATURE .	Signations, typios or printed harner of requirered ager	of arisi frio f	'வுரின்' (NC	TE Ringisteriori Ag	june signature require	od when reinstating)	DATE	<b></b>
12.	OFFICERS AF	NO DIBI		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE NAME	PDT THAYER, STELLA F		DELETE	1.1 TITLI 1.2 NAM			☐ Change	☐ Addition
STREET ADDRESS	111 MADISON ST, STE. 230			ET ADDRESS				
CITY-ST-ZIP	TAMPA FL		· · · · · · · · · · · · · · · · · · ·		- ST - 7IP			
TITLE	VD		DELETE	2.1 ¥(TL)	i		Change	Addition
NAME STREET ADDRESS	FERGUSON, HOWELL F 310 W. COLLEGE AVENUE			2.2 NAM 2.3 STRE	E1 ADDRESS			
CITY - ST - ZIP	TALLAHASSEE FL				-ST-ZIP			
TITLE	SD		DEFELE	3.1 TITLE			Change	Addition
NAME	ALLEN, JUDY			3.2 NAM				
STREET ADDRESS CITY-ST-ZIP	111 MADISON STREET, STE TAMPA FL	, 2300			ET ADDRESS '- S1- ZIP			
TITLE			DETEIE	41 TITLE			☐ Change	Addition
NAME				4 2 NAN	le l			
STREET ADDRESS					FT ADDRESS			
CITY-ST-ZIP TITLE			DETELE	4.4 C/TY 5.1 TITLE	-ST-7IP	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME				5.2 NAM			En ormigo	
STREET ADDRESS				5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			Figure		- ST - ZIP			T A A AND A
TITLE NAME			DELETE	6 1 TITU 6 2 NAM			Change	☐ Addition

6.3 STREET ADDRESS

STREET ADDRESS

63 STREET ADDRESS

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)(k), Florida Statutes. I further certify that the information indicated on this annual report of suppliemental 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 this 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 in planting d, or on an altrachment with an address.

SIGNATURE:

1/18/96

1/18/96

Daytime Priorie \*

## MACFARLANE AUSLEY FERGUSON & McMullen

ATTORNEYS AND COUNSELORS AT LAW

III MADISON STREET, SUITE 2300 P.O. BOX (63) (ZIP 3360)) TAMPA, FLORIDA 33802 (813) 273-4200 FAX (813) 273-4396

227 SOUTH CALHOUN STREET P.O. BOX 391 (ZIP 32302) TALLAHASSEE, FLORIDA 32301 1904) 224-9115 FAX (904) 222-7560

January 18, 1996

400 CLEVELAND STREET P. O. BOX (669 (ZIP 34617) CLEARWATER, FLORIDA 34615 (813) 441-8966 FAX (813) 442-8470

Post Office Box 1531

Division of Corporations Annual Reports Section Post Office Box 13900 Tallahassee, Florida 32317

Re: Aboly Foundation, Inc.

Dear Sirs:

I enclose 1996 Corporation Annual Report for Aboly Foundation, Inc., a non-profit corporation, together with a check payable to Department of State in the amount of \$61.25 in payment of the filing fee.

> Sincerely yours, Atella & Theyer

Stella F. Thayer

SFT/jma Encs.