

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 # **726777** (6)

1. Corporation Name
EDYTH BUSH CHARITABLE FOUNDATION, INC.



Principal Place of Business: 199 E. WELBOURNE AV. P.O. BOX 1967 WINTER PARK FL 32790-1967
Mailing Address: 199 E. WELBOURNE AV. P.O. BOX 1967 WINTER PARK FL 32790-1967

3. Date Incorporated or Qualified: **06/22/1973**
3a. Date of Last Report: **02/01/1995**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	23-7318041	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
23	28		
Zip	Country	24	25
29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ODAHOWSKI, DAVID A 199 E WELBOURNE AVE WINTER PARK FL 32789		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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	VCD <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FORWARD, CHARLOTTE HEUSE	1.2 NAME	Belloff, Mary Gretchen
STREET ADDRESS	4316 N 40TH ST	1.3 STREET ADDRESS	6533 E. Jefferson #404
CITY - ST - ZIP	PHOENIX AZ	1.4 CITY - ST - ZIP	Detroit, MI 48207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	D
NAME	HOLM, HERBERT W	2.2 NAME	
STREET ADDRESS	1269 SERENA DR	2.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	2.4 CITY - ST - ZIP	
TITLE	PED <input type="checkbox"/> DELETE	3.1 TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERTS, DAVID R	3.2 NAME	Odahowski, David A.
STREET ADDRESS	401 N INTERLACHEN	3.3 STREET ADDRESS	345 Prairie Dune Way
CITY - ST - ZIP	WINTER PARK FL	3.4 CITY - ST - ZIP	Orlando, FL 32828
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WOODARD, MILTON P.	4.2 NAME	Coladao, Guy D.
STREET ADDRESS	6930 FAIRWAY RD	4.3 STREET ADDRESS	1936 Fawsett Road
CITY - ST - ZIP	LA JOLLA CA	4.4 CITY - ST - ZIP	Winter Park, FL 32789
TITLE	VD <input checked="" type="checkbox"/> DELETE	5.1 TITLE	
NAME	HOLM, HERBERT W.	5.2 NAME	(see attached)
STREET ADDRESS	461 BELOIT AVE	5.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	5.4 CITY - ST - ZIP	
TITLE	VCD <input type="checkbox"/> DELETE	6.1 TITLE	CD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEE, H. CLIFFORD	6.2 NAME	
STREET ADDRESS	700 MELROSE DR., APT A24	6.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	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)(k), 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: David A. Odahowski, Pres. Date: 2/14/96 Daytime Phone #: 407/647-4322

CR2E037 (12/95)

ADDITIONS

D

Hilbrich, Gerald F.
107 Amberwood Court
Longwood, FL 32779

D

Swartzel, Vernon
3006 Alamo Drive
Orlando, FL 32805

D

Waggoner, Robert E.
110 Spring Valley Loop
Altamonte Springs, FL 32714