

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 MAY 12 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 740191

1. Corporation Name
Foundation To Fight Corruption, Inc.

Principal Place of Business Mailing Address
**Bristol Florida
Hi-way C-270 North-Sweetwater Community
Star Route 2, Box 54
Bristol, Florida 32321**

2. Principal Place of Business
21 **Bristol, Florida**

2a. Mailing Address

Suite, Apt. #, etc.
22 **Star Rt. 2, Box 54**

Suite, Apt. #, etc.

City & State
23 **Bristol, Florida**

City & State

Zip
24 **32321**

Country

25 **U.S.A.**

Zip

Country

29

30

3. Date Incorporated or Qualified

9-20-1997

3a. Date of Last Report

5-31-96

4. FEI Number

59-1801632

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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**Jimmy Hatcher
Hi-way C-270 North-Sweetwater COMM
Star Route 2, Box 54
Bristol, Florida 32321**

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 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE **President - D.** ☐ DELETE
NAME **Jimmy Hatcher**
STREET ADDRESS **Star Rt 2, Box 54**
CITY-ST-ZIP **Bristol, Florida 32321**

TITLE **Vice President - D.** ☐ DELETE
NAME **Camy Everett**
STREET ADDRESS **516 South 6th Street**
CITY-ST-ZIP **Chipley, Florida 32428**

TITLE **Sec. Treas - D.** ☐ DELETE
NAME **Vivian Hatcher**
STREET ADDRESS **Star Rt 2, Box 54**
CITY-ST-ZIP **Bristol Florida 32321**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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

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

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 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 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 my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-12-97

Date

904-643-2655

Daytime Phone #

CR2E037 (9/96)