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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 740961

1. Corporation Name

THE BERNARD A. CHAPMAN FOUNDATION, INC.

Principal Place of Business

100 WATERWAY ROAD
APARTMENT E-308
TEQUESTA FL 33469

Mailing Address

100 WATERWAY ROAD
APARTMENT E-308
TEQUESTA FL 33469



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

12/06/1977

4. FEI Number

38-6062974

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

9. Name and Address of Current Registered Agent

CHAPMAN, ANNA V
100 WATERWAY, APT E308
TEQUESTA FL 33469

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 PD
NAME CHAPMAN, ANNA V
STREET ADDRESS 100 WATERWAY APT E308
CITY-ST-ZIP TEQUESTA FL

TITLE VD
NAME LEIGHTY LINDA
STREET ADDRESS 3101 TUCKER RD
CITY-ST-ZIP GREENVILLE NC

TITLE TD
NAME CHAPMAN, LAWRENCE A
STREET ADDRESS 1213 BRENTWOOD AVE.
CITY-ST-ZIP RICHLAND WA

TITLE D
NAME CHAPMAN, ANNA V.
STREET ADDRESS 100 WATERWAY RD #E308
CITY-ST-ZIP TEQUESTA FL

TITLE D
NAME CHAPMAN, LAWRENCE A.
STREET ADDRESS 1213 BRENTWOOD AVE
CITY-ST-ZIP RICHLAND WA

TITLE D
NAME LEIGHTY, LINDA
STREET ADDRESS 3101 TUCKER ROAD
CITY-ST-ZIP GREENVILLE NC 27858

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

zip = 33469-2761

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

27858-6017

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

99352

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

33469-2761

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

99352

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

27858-6017

14. I 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

3-8-99

561-746-8552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0046512

CR2E037-11/98