## **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

DOCUMENT #

749034

(5)

** COIPOIAN	OII FIGHTO	, ,			1			
ANDA	raeon foundation, inc				 			
Principal Place of Business Mailing Address								
	E DRIVE A FL 33982-9763	32111 SERENE DRIVE PUNTA GORDA FL 3398	2-9763					
US		US			3. Date Incorporated or Qualified 09/24/1979	3a. Date	e of Last 04/02/1	
	Place of Business	2a. Mailing Address			4. FEI Number 59-1950194			Applied For
Suite, Apt	I # elc	Suite, Apt. #, etc.			03-1300154			Not Applicable Additional
22	, 000	27			5. Certificate of Status Desired			Required
City & Sta	ate	City & State			6. Election Campaign Financing	F-1		O May Be
<b>23</b>   Zip	Country	26 Zip	Col	untry	Trust Fund Contribution			d to Fees
	25	29	30	artery	8. This corporation has liability fo Florida Statutes	r intangible to		s. 199.032,
<u> </u>	9. Name and Address of Curre		1001		10. Name and Address of New R			
				81 Name			,	
GIDEL, ROBERT D.				82 Street A	eet Address (P.O. Box Number is Not Acceptable)			
32111 SERENE DRIVE				83				
PUNTA GORDA FL 33982-6763						1.40.00	- 4 L	
				<b>84</b> City		FI	85   Zip	o Code
11. Pursuan	t to the provisions of Sections 617.05	02 and 617,1508, Florida Stat	tutes, the a	bove-named c	corporation submits this statement for the oration's board of directors. I hereby accoration	purpose of c	changing	its registered
agent. 1	am familiar with, and accept the oblig	gations of, Section 617.0503,	Florida Sta	tutes.	bracion's board of directors, I helpby acco	abr me sphor	HITH HOUR 4	is reflisiered
SIGNATURE	Signature, typed or printed name of registered ag	A COLOR OF THE PARTY OF THE PAR	OTE Decision	d A - a t a i a - a t a	equired when reinstating)	DATE		
12.		ND DIRECTORS	13.	o Agent signature re	ADDITIONS/CHANGES TO OFF		DIRECTO	ORS IN 12
TITLE	POS	☐ DELETE	1.11	ITLE		Ţ	Change	
NAME	GIDEL, ROBERT D.		1.2 N	AME				
STREET ADDRESS	1		- 8	TREET ADDRESS				
CITY - ST - ZIP	PUNTA GORDA FL	DELETE		ITY-ST-ZIP		<del></del>	Change	a Addition
TITLE NAME	VTD <del>Bostwick, Kathryn D</del>		2.1 T 2.2 N	1	Buse Tide of Longit Act		N Chiango	, Madition
STREET ADDRESS			1	TREET ADDRESS	BOSTWICK, KATHRYN	<b>B</b> .		
CITY-ST-ZIP	PUNTA GRODA FL.			CITY-ST-ZIP				
TITLE	D	DELETE	3.1 T		<del>- 111, </del>	Ţ	Change	Addition
NAME	STANLEY, W. B. J		3.2 N	AME				
STREET ADDRESS	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	E T-17	1	Treet address				•
CITY-ST-ZIP TITLE	MARIETTA GA	DELETE	3.4.1 4.1 T	CITY-ST-ZIP			Change	Addition
NAME		□ outil		VAME				- Addition
STREET ADDRESS				TREET ADDRESS	,			
CITY-ST-ZIP				ITY-ST-ZIP				
TITLE		DELETE	5.1 T	TLE .			Change	e Addition
NAME			5.2 N	1				
STREET ADDRESS	5		•	TREET ADDRESS				
CITY-ST-7IP		DELETE	5.4 C 6.1 T	ITY-ST-ZIP			Change	e Addition
TITLE NAME		T pertin	6.2 N			Ļ	2.km/gc	. La nadillo
STREET ADDRESS				TREET ADORESS				
CITY.ST.7IP	1			STY-ST-7IP				

6.4.CITY-S1-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 an address.

SIGNATURE

ROBERT D. GILL CHROBERT D. GIDEL

411147

941-575-310 B

**FILED** 

Apr 07 1997 8:00am

Secretary of State