

FILE NO.: FILING FEE IS \$11.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # **749034**

(5)

1. Corporation Name

ANDARAEON FOUNDATION, INC.

Principal Place of Business

**32111 SERENE DRIVE
PUNTA GORDA FL 33982-9763
US**

Mailing Address

**32111 SERENE DRIVE
PUNTA GORDA FL 33982-9763
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

28 Zip

Country

3. Date Incorporated or Qualified

09/24/1979

4. FEI Number

59-1950194

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**

7. Is this nonprofit corporation a homeowners association?

☐ Yes☒ No8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.☒ Yes☐ No

9. Name and Address of Current Registered Agent

**GIDEL, ROBERT D.
32111 SERENE DRIVE
PUNTA GORDA FL 33982-9763**

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 **PDS** ☐ DELETENAME **GIDEL, ROBERT D.**
STREET ADDRESS **32111 SERENE DRIVE**
CITY - ST - ZIP **PUNTA GORDA FL**TITLE **VTD** ☐ DELETENAME **BOSTWICK, KATHRYN B.**
STREET ADDRESS **27111 W. MARION AVE**
CITY - ST - ZIP **PUNTA GORDA FL**TITLE **D** ☐ DELETENAME **STANLEY, W. B. J**
STREET ADDRESS **1805 ROSWELL ROAD, SUITE T-17**
CITY - ST - ZIP **MARIETTA GA**TITLE ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIPTITLE ☐ DELETENAME
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 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.

FILED
Apr 28 1998 8:00am
Secretary of State

CR2E037 (10/97)