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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

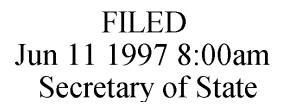
DOCUMENT # 7

1. Corporation Name

762456

(2)

FLORIDA POISON INFORMATION CENTER FOUNDATION, IN C.





Principal Place of Business Mailing Address				I SABEII IBOIO SIIID SIBII GIBŞI BIIID	Rini dydyl didyl didin dydyr dydir didin (89)	
TGH - RM A324		P.O. BOX 1289				
tampa FL 336 US	06	TAMPA FL 33601-1289 US				
08		00			3. Date Incorporated or Qualified 03/17/1982	3a. Date of Last Report 08/05/1996
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26					59-2192088	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Regulred	
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for	
24	25	29	30			Yes No
	9. Name and Address of Curren	it uadistated What		81 Name	10. Name and Address of New Re	Bisrated Whaur
DCI I EQ	DINO VICTOR I COO		l			
PELLEGRINO, VICTOR J., ESQ. 4830 W. KENNEDY BLVD., SUITE 750 TAMPA FL 33809				82 Street A	ddress (P.O. Box Number is Not Acceptat	ole)
			ŀ	83		
i Mini Ci	1 2 00000		ļ			
				B4 City		FL 85 Zip Code
agent. I a SIGNATURE	am familiar with, and accept the obligation of registered age				corporation submits this statement for the paration's board of directors. I hereby acce	DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	PD &	☐ DELETE	1.1 111	LE		Change Addition
NAME	GAAR, GREFORY		1.2 NA	ME		
STREET ADDRESS	4 COLUMBIA DRIVE #810			REET ADDRESS		
CITY-ST-ZIP TITLE	TAMPA FL VD	DELETE	1.4 Crī 2.1 Trī	Y-ST-ZIP		Change Addition
NAME	RIGGS, DAN	□ pricit	2.1 III 2.2 NA	,		C outside C vontroil
STREET ADORESS	4 COLUMBIA DRIVE #860-D			REET ADDRESS		
CITY-ST-ZIP	TAMPA FL			TY-ST-ZIP		
TITLE	ST	☐ DELETE	3.1 1/1			☐ Change ☐ Addition
NAME	LANE, MARSHA		3.2 NA	ME		
STREET ADDRESS	209 SOUTH MORGAN STREE	Ť	3.3 \$1	REET ADDRESS		
CITY-ST-ZIP	TAMPA FL		3.4. CI	TY-ST-ZIP		
TITLE		☐ DELETE	4.1 117	L E		Change Addition
NAME			4. 2 NA	1		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CiT 5.1 TiT	Y-ST-ZIP		Change Addition
NAME		La Dittil	5.2 NA			C Antille C Vapition
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP	Ì			Y-ST-ZIP		
TITLE		DELETE	6.1 TIT			Change Addition
NAME		_	6.2 NA			• •
STREET ADDRESS			6.3 ST	REET ADDRESS		
CITY-ST-ZIP			6.4 CIT	Y-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)(1). 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 on the society 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, b) on injusted ment with an address.

Gregory G. G.CO.

6/6/07