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Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 763927 (1)

1. Corporation Name

GRANT-A-WISH FOUNDATION OF NORTHWEST FLORIDA, IN
C.

Principal Place of Business

Mailing Address

601 SOUTH PALAFOX ST
P.O. BOX 12584
PENSACOLA FL 32573601 SOUTH PALAFOX ST
P.O. BOX 12584
PENSACOLA FL 32573-25843. Date Incorporated or Qualified
06/25/19823a. Date of Last Report
01/25/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, GERALD L.
601 SOUTH PALAFOX STREET
P.O. BOX 12584
PENSACOLA FL 32573

81 Name

Gerald L. Brown

82 Street Address (P.O. Box Number is Not Acceptable)

30 S. Spring Street

83

84 City

Pensacola,

FL

85 Zip Code

32501

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD ☒ DELETE
NAME TAYLOR, REBECCA
STREET ADDRESS 1458 SANIBEL LANE
CITY-ST-ZIP GULF BREEZE FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE TD ☐ DELETE
NAME BROWN, GERALD L.
STREET ADDRESS 601 SOUTH PALAFOX ST
CITY-ST-ZIP PENSACOLA, FL 000002.1 TITLE ☒ Change ☐ Addition
2.2 NAME TD
2.3 STREET ADDRESS Gerald L. Brown
2.4 CITY-ST-ZIP 30 S. Spring Street
Pensacola, FL 32501TITLE PD ☐ DELETE
NAME CABASSA, RONALD S.
STREET ADDRESS 2635 VENETIAN WAY
CITY-ST-ZIP GULF BREEZE FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME GOODMAN, MARCIE L.
STREET ADDRESS 9812 BRIDGEWOOD LANE
CITY-ST-ZIP PENSACOLA FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME DONNALLEY, DEBBIE
STREET ADDRESS 6065 HILBURN RD
CITY-ST-ZIP PENSACOLA FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME LEWIS, LINDA S.
STREET ADDRESS 2275 SCENIC HWY. #131
CITY-ST-ZIP PENSACOLA FL6.1 TITLE ☒ Change ☐ Addition
6.2 NAME D
6.3 STREET ADDRESS Linda A. Smarr
6.4 CITY-ST-ZIP 2275 Scenic Hwy. #131
Pensacola, FL 32503

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-97 804 433 6581

Date

Daytime Phone # 0074911

CR2E037 (9/96)