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NONPROFIT CORPORATION ANNUAL REPORT 1997



PUBLIO M. SANTANA

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

766165

(5)

## FELLOWSHIP FOUNDATION, INC.

## FILED Feb 03 1997 8:00am Secretary of State



Date

Daytime Phone # 0030032

South   Principal Place of Business   Ze. Multing Address   Ze. Multing Address   A. FEI Number   Record   Re	Principal Place	of Business	Mailing Address			à fântie anna Altha mine signa alla	/ P418 WIND DIWN WINI ALM	(12 6580) MIBIC 1881	
SUTH MAMI FL 33143 SOUTH MAMI FL 33143 SUTH MAMI FL									
Tyriscipal Place of Business   2e   Melling Address   2e   Scale, Apt. 4; etc.   2e   Scale   2e   Scale, Apt. 4; etc.   2e   S	SOUTH MIAMI FL 33143 US		SOUTH MIAMI FL 33143-3622			Date Incorporated or Qualified     12/15/1982	3. Date Incorporated or Qualified 3a. Date of Last Report 02/29/1996		
Solido, April, #, etc.    Suito, April, #, etc.   Suit	2. Principal P	ace of Business	2a. Mailing Address		<del></del>	4. FEI Number	1 42,20,		
Solite, Apt. #, etc.    Suite, Apt. #, etc.	п	·				FO-0057060		Not Applicable	
City & State	Suite, Apt. #, etc. Suite, Apt. #, etc.					5 Certificate of Status Desired S8.75 Additions		-	
ZPD Country Zip Country 3						o. Certificate of Status Desired	Fee	Required	
Country   Country   Cap   Country   Cap   Country   Same and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Address of New Registered Age	City & State		<u> </u>						
SANTANA, PUBLO M.   SANTANA, PUBLO M.   SANTANA, PUBLO M.   STI1 S DIXIE HWY   SOUTH MIAMIF I. 33143   82   82   82   82   82   82   82   8	3								
SANTANA, PUBLIO M. 5711 5 DIXE HWY SOUTH MIAMI FL 33143  83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Socilions 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registeric 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 registeric 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 registeric 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 registeric agent and maintain with, and accept the obligations of, Section 617,5003, Florida Statutes  11. Pursuant to the provisions of Socilions 617,0503, Florida Statutes  12. CIFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. CIFICERS AND DIRECTORS  13. STREET ADDRESS  14. STREET ADDRESS  15. CRANDON BLVD  16. STREET ADDRESS  17. ST. 2P  17. ST. 2P  17. ST. 2P  17. STREET ADDRESS  17. ST.	Ζιρ <b>4</b>	·			′		· · · · · · · · · · · · · · · · · · ·		
SANTANA, PUBLIO M. 5711 S DIXIE HWY SOUTH MIAMI FL 33143  83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Socions 617,0502 and 617,1508, Florida Statutes. The ebove-mand corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered in the provisions of socions 617,0502 and 617,1508, Florida Statutes. The ebove-mand corporation submits this statement for the purpose of changing its registered agent. I am laminiar with, and accept the depointment as registered agent. I am laminiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  Signature layer or immitted agent are see it applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. STATE ALORESS  14. STATE ALORESS  14. STATE ALORESS  14. STATE ALORESS  15. STATE ALORESS  16. STATE ALORESS  16. STATE ALORESS  17. ST. 2P   16. D  17. STATE ALORESS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Change Addit Alores  22. NAME  23. STREET ALORESS  24. CITY. ST. 2P  15. STATE ALORESS  25. STREET ALORESS  26. STREET ALORESS  26. STREET ALORESS  26. STREET ALORESS  26. STREET ALORESS  27. ST. 2P  14. STATE  14	41			[30]				<u></u>	
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STIT S DIXE HWY   SOUTH MIAMI FL 33143	CANTAN	A DUDUO M							
SOUTH MIAMI FL 33143    83				82	82 Street Address (P.O. Box Number is Not Acceptable)				
SOUTH MIAMIN FL SST93   B44 City			83	63					
I. Pursuant to the provisions of Socions 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 and the provisions of the obligations of, Section 617.0503, Florida Statutes.    Contact   Conta	SOU IN I	MIMMI PE 33143						<u> </u>	
II. Fursuant to the provisions of Sections 617 0502 and 617 1508. Florids Statutes, the above-named corporation submits this statement for the purcose of changing its register of office or registered agent to both in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the linguistic provided Statutes and I amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes			•	84	City		E 85 7	Zip Code	
office or registered agent, or both, in the State of Florida, Such change was authorized by the comporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 617-05-03, Florida Statutes.    Common temperature of the provided name or registered agent and bite ill appicable.   NOTE Registered Agent signature required when reintering)	11 Durework	to the provisions of Costions 617.06	02 and 617 1608 Florida State	utes the shou	e-pamed	corporation submits this statement for the	1	na ite realetere	
SIGNATURE   Signature types or printed name of regulated agent and size it applicable.   INTER Registered Agent signature required when relinations)   DATE	office or re	egistered agent, or both, in the Stat	e of Florida. Such change was	authorized b	v the corp	poration's board of directors. I hereby acc	apt the appointment	t as registered	
Signature layer of prototed marked appicable.  IREE TO OFFICERS AND DIRECTORS  INCE  TO STORMAN FL  INCE  IN	agent. I a	m familiar with, and accept the obliq	gations of, Section 617.0503, F	lorida Statute	S.	;			
ILLE ITD	SIGNATURE	Storial tro, turned or Diction name of registered as	pent and title if applicable (NC	TF: Begistered An	ant signature	zeruized when rejectation)	DATE		
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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 to the same legal effect as if made under cath; the same legal effect as if mad	CITY-ST-ZIP					l I			
minormation institution of the companion of the consistency of the con	14. I do heret	by certify that the information supplied indicated on this appual report of	ed with this filing does not qua	alify for the ex	emption of	Tated in Section 119.07(3)(i), Florida Statu	ies. I further certify that effect as if med-	that the	
appears in Block 12 or Block 13 if changed, or on an attachment with appears in Block 12 or Block 13 if changed, or on an attachment with appears in Block 12 or Block 13 if changed, or on an attachment with appears in Block 12 or Block 13 if changed, or on an attachment with appears in Block 12 or Block 13 if changed, or on an attachment with appears in Block 12 or Block 13 if changed, or on an attachment with appears in Block 12 or Block 13 if changed, or on an attachment with appears in Block 13 if changed, or on an attachment with appears in Block 13 if changed, or on an attachment with appears in Block 13 if changed, or on an attachment with appears in Block 13 if changed, or on an attachment with appears in Block 13 if changed, or on an attachment with appears in Block 13 if changed, or on an attachment with appears in Block 13 if changed, or on an attachment with appears in Block 13 if changed in Blo	I am an o	flicer or director of the corporation of	or the receiver or trustee empo	world to exe	oute this r	eport as required by Chapter 617, Florida	Statutes; and that i	my name	