FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 7

1998

766322

(2)

FILED Feb 10 1998 8:00am Secretary of State

1. Corporation Name					
WYOMING PHILANTHROPIC TRUST, INC.					
TOMING FRIENTIANOPIO INUST, INC.				I HEALT WAS BUILD BY THE BUILD BUILD BY THE	8(83)
					######################################
Principal Place of Business Mailing Address				1 108411 18410 01110 01100 11110 11010 1101 01811 01011	81811 9 1911 81911 81811 1891
3001 TAMIAMI TRAIL NORTH, ROOM 207 3001 TAMIAMI TRAIL NORTH			I ROOM 207	3. Date Incorporated or Qualified	
NAPLES FL 34103 NAPLES FL 33940				12/28/1982	
US		US		4. FEI Number	Applied For
				59-2290272	Not Applicable
2. Principal Place of Business 2a. Mailing Address		, ,		\$8.75 Additional	
21 26				5. Certificate of Status Desired	Fee Required
		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
22 27				Trust Fund Contribution	Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association?	
			Country	This corporation owes or has paid the current	<u> </u>
24	25	 	iol		Yes No
	9. Name and Address of Current			10. Name and Address of New Registered Ag	
81 Name				Paulanial Janal T	
ALFES, ANN G				Per Kovich, Joseph T. dress (P.O. Box Nurrber is Not Adceptable)	
3001 TAMIAMI TR N, RM 207				3001 Tamiami Trail N. #	207
NAPLES FL 34103			83	•	
			84 City		85 Zip Code
		· · · · · · · · · · · · · · · · · · ·		Nacies FL	24103
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 register 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 registere agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.					
SIGNATURE Joseph T Perkovich /23 98 Signature, typed if pirited name of registered agent and title It applicable. (NOTE: Registered Agent signature required when relinstating) DATE					
12,	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 12
TITLE	DPT	DELETE	1.1 TITLE		Change Addition
NAME	COLLIER, BARRON G. III		1.2 NAME		
STREET ADDRESS	911 12TH ST		1.3 STREET ADDRESS		13
CITY-ST-ZIP	CODY WY		1.4 CITY-ST-ZIP		
TITLE	\$VD	☐ DELETE	2.1 TITLE		Change
NAME	Collier, Theresa A.		2.2 NAME		
STREET ADDRESS	911 12TH ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	CODY WY		2. 4 CITY-ST-ZIP		7
TITLE	0	⊠ DELETE	3.1 TITLE		Change Addition
NAME	ALFES, ANN G			Milliam L. Simpson, Esq.	
STREET ADDRESS	3001 TAMIAMI TR N, RM 207			LVAN MA 85919 1182 192 Street	
CITY-ST-ZIP	NAPLES FL	DELETÉ	D.4: 0171 07 Em		Change Addition
TITLE		E DULLIE	4.1 TITLE	•	Truguda [77] voquion
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY+ST-ZIP 5.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		occen	5.2 NAME		J Onsings resulton
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		•	5.4 City-St-Zip		
TITLE	<u> </u>	☐ DELETE	6.1 TITLE		Change Addition
NAME		_ _	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby c	ertify that the information supplied with	this filing does not qualify for		in Section 119.07(3)(i), Florida Statutes. I further certif	y that the information

4. 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.

CIONATURE

1.23.98

941-435-1122