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Apr 30 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 768234 (7)
1. Corporation Name
HANLEY-HAZELDEN FOUNDATION INC.

Principal Place of Business Mailing Address
5200 EAST AVENUE WEST PALM BEACH FL 33407-2374
5200 EAST AVENUE WEST PALM BEACH FL 33407-2352



2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

3. Date incorporated or Qualified 05/02/1983 3a. Date of Last Report 04/19/1996
4. FEI Number 59-2347305 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
PLANT, TIMOTHY D., EXECUTIVE DIRECTOR
HANLEY-HAZELDEN CENTER AT ST MARY'S
5200 EAST AVENUE
WEST PALM BEACH FL 33407

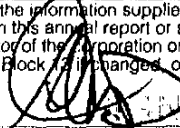
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D HAMILTON, ANITA 1436 NORTH OCEAN WAY PALM BEACH FL	1.1 TITLE	D HAMILTON, ANITA 330 COCOANUT ROW, APT 5C PALM BEACH FL
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	TD CARP, MICHAEL T. 1521 FOREST HILL BLVD #3 W PALM BCH. FL	2.1 TITLE	TD CARP, MICHAEL T. 1497 FOREST HILL BLVD., SUITE G W PALM BCH. FL
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	SD HANLEY, MARY JANE 713 S.W. THORNHILL LN. PALM CITY FL	3.1 TITLE	SD HANLEY, MARY JANE 600 ST. ANNE'S LANE VERO BEACH, FL
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D ELHILOW, VINCE A. 218 DATURA ST WEST PALM BEACH FL	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D AUGUST, JOAN 4702 S.LAKE DR. BOYNTON BCH. FL	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	CD HANLEY, MICHAEL J 1350 LITTLE HARBOUR DRIVE VERO BEACH FL	6.1 TITLE	CD HANLEY, MICHAEL J 1355 PEACHTREE STREET ATLANTA, GA 30309
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-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)(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, changed, or on an attachment with an address.

SIGNATURE:  Treas. M. J. Hanley, DT. Corp. 1997 301-888-1666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0040432

CR2E037 (9/96)