FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

141

1. Corporation Name FIRST AMENDMENT FOUNDATION, INC.					
1 11101	AMENDIMENT TOOMDATIC)14, 114C:			
Principal Plac	e of Business	Mailing Address			
336 E. COLLEGE AVE TALLAHASSEE FL 32301		336 E. COLLEGE AVE TALLAHASSEE FL 323			
				3. Date Incorporated or Qualified 10/13/1983	3a. Date of Last Report 03/09/1995
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Cuito Aot & oto		26		59-2449379	Not Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust rand Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for intan Florida Statutes	gible tax under s. 199.032, ∕es. □ No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Regis	
			81 Name		
SHELTON, RICHARD D.			82 Street Ac	Idress (P.O. Box Number is Not Acceptable)	
336 E. COLLEGE AVE.					
TALLAH	HASSEE FL 32301		83		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508. Florida Statut	es the above named corr	poration submits this statement for the purpose	of changing its registered office
or registe	red agent, or both, in the State of Flor ith, and accept the obligations of, Sec	rida. Such change was authoriz	ed by the corporation's bo	out atom submits this statement for the purpose out of directors. I hereby accept the appointm	nent as registered agent. I am
SIGNATURE			'		
	Signature, typed or protexticality of registered age:	77.5 5.44	L. Registered Agent signalure rou		[A't
12.	T	ND DIRECTORS	13.	ADDITIONS CHANGES TO GELICE?	
TITLE	— PD 1	DEFELE	1 1 TITLE		Change Addition
STREET ADDRESS	WEITZEL, PETE		1.2 NAME		
CITY-ST-ZIP	MIAMIFE		1.3 STREET ADDRESS		
Tifle	-STD-	DELETE	1 4 City-St-ZiP	<u>415</u>	☐ Change ☐ Addition
NAME	SHELTON, DICK		2 2 NAME	21.0	E outride
STHEEL ADDRESS	336 E. COLLEGE AVE		2 3 STREET ADDRESS		
City-St-ZiP	TALLAHASSEE FL		2 4 C/TY-ST-ZIP		
TITLE	-₩	DELETE		70	Change Addition
NAME	SHAW, BOB		3.2 NAME	• •	
STREET ADDRESS	277 N MAGNOLIA DRIVE		3 3 STREET ADDRESS		
CITY - ST - ZIP	TALLAHASSEE FL		3.4 CITY-ST-ZIP		/
TITLE	-10	POELETE	4 I TILLE	UP	Change Addition
NAME	-DUNN-RANKIN, DEREK		4 2 NAME	LOW O'N WKY	
STREET ACORESS	-200 E MIAMI AVENUE		4.3 STREET ADDRESS	FOM OIHARA E751 S. DIXE HWY W. Paim Beau, FC 334	1.4
CITY - S1 - ZIP	VENICE FL	Declete		NITHIN HOWING 339	
TITLE NAME	- TD-→	(E_ATTICLE	5 1 TITLE		Change Addition
STREET ADDRESS	-SCHULTZ, DAVE		5.2 NAME		
City - ST - ZIP	LAKELAND FL		5 3 STREET ADDRESS		
TITLE	ED	DELETE	5 4 CITY+ST+ZIP 6 1 TITLE		☐ Change ☐ Addition
NAME	PETERSON, BARBARA		6.2 NAME		
STREET ADDRESS	336 E COLLEGE AVENUE		63 STREE! ADDRESS		
City St-ZIP	TALLAHASSEE EL		6.4 CITY - ST - 7IP		

14. I do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, Inal 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 13 if changed, or on an attachment with an address.

SIGNATURE: RIVER TO SULLAND SIGNATURE OF DIRECTOR OF DIRECTOR OF SIGNATURE OF SIGNA

2/1/96

904/222-5790