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**Secretary of State**

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**NONPROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 771118**

1. Corporation Name

**THE FOUNDATION FOR THE CHURCH OF THE PALMS - PREBYTERIAN (U.S.A.), INC.**

122391 - 90047 - 23



Principal Place of Business

3224 BEE RIDGE ROAD  
 1671 S. DR.  
 SARASOTA FL 34239  
 US

Mailing Address

3224 BEE RIDGE ROAD  
 1671 S. DR.  
 SARASOTA FL 34239  
 US

2. Principal Place of Business

21 3224 Bee Ridge Rd

2a. Mailing Address

26 3224 Bee Ridge Road

3. Date Incorporated or Qualified  
 11/07/1983

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

4. FEI Number

59-2434393

Applied For

Not Applicable

23 City & State

SARASOTA, FLORIDA

28 City & State

SARASOTA, FLORIDA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip

34239

25 Country

U.S.A.

29 Zip

34243

30 Country

U.S.A.

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

SAVARY, JOHNSON S.  
 240 SO PINEAPPLE AVE  
 SARASOTA FL 34236

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

TITLE: DASH, DONNA  
 NAME: DASH, DONNA  
 STREET ADDRESS: 5672 ST LOUIS AVE.  
 CITY-ST-ZIP: SARASOTA FL 34233

TITLE: DT  
 NAME: VANDERZEE, ROBERT  
 STREET ADDRESS: 7913 BROADMOOR PINES BLVD  
 CITY-ST-ZIP: SARASOTA FL

TITLE: DS  
 NAME: GOODWILL, JAY  
 STREET ADDRESS: 1768 OAK LAKES DRIVE  
 CITY-ST-ZIP: SARASOTA FL

TITLE: DP  
 NAME: TRUMPLER, RICHARD  
 STREET ADDRESS: 7601 WEEPING WILLOW BLVD  
 CITY-ST-ZIP: SARASOTA FL

TITLE: D  
 NAME: MERRITT, SCOTT  
 STREET ADDRESS: 4711 MEADOWVIEW CIRCLE  
 CITY-ST-ZIP: SARASOTA FL

TITLE: VD  
 NAME: SAVARY, JOHNSON S  
 STREET ADDRESS: 1671 SOUTH DRIVE  
 CITY-ST-ZIP: SARASOTA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: DASH, DONNA  
 1.2 NAME: DASH, DONNA  
 1.3 STREET ADDRESS: 5672 ST LOUIS AVE.  
 1.4 CITY-ST-ZIP: SARASOTA, FL 34233

2.1 TITLE: [Blank]  
 2.2 NAME: [Blank]  
 2.3 STREET ADDRESS: [Blank]  
 2.4 CITY-ST-ZIP: [Blank]

3.1 TITLE: [Blank]  
 3.2 NAME: [Blank]  
 3.3 STREET ADDRESS: [Blank]  
 3.4 CITY-ST-ZIP: [Blank]

4.1 TITLE: [Blank]  
 4.2 NAME: [Blank]  
 4.3 STREET ADDRESS: [Blank]  
 4.4 CITY-ST-ZIP: [Blank]

5.1 TITLE: [Blank]  
 5.2 NAME: [Blank]  
 5.3 STREET ADDRESS: [Blank]  
 5.4 CITY-ST-ZIP: [Blank]

6.1 TITLE: [Blank]  
 6.2 NAME: RAY L. SANDHAGEN  
 6.3 STREET ADDRESS: 7741 RED CEDAR LANE  
 6.4 CITY-ST-ZIP: SARASOTA, FLA. 34241

14. 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/25/99 (94) 355-4468

CR2E037 (11/98)