

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 837106 (4)
1. Corporation Name

THE FLAGLER FOUNDATION, INC.

Principal Place of Business

1001 EAST MAIN STREET, ROOM 601
RICHMOND VA 23219
US

Mailing Address

P.O. BOX 644
RICHMOND VA 23205-0644
US

2. Principal Place of Business

2a. Mailing Address

21 6017 Hampstead Ave.
Suite, Apt. #, etc.

26 P. O. Box 8690
Suite, Apt. #, etc.

22 City & State

City & State

23 Richmond, VA

28 Richmond, VA

24 Zip 23226 Country USA

29 Zip 23226 Country USA

3. Date Incorporated or Qualified
09/29/1976

3a. Date of Last Report
03/31/1995

4. FEI Number 59-6051282
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONE, FRED M JR
FIRST UNION NATIONAL BANK TOWER
225 WATER STREET, SUITE 1235
JACKSONVILLE FL 32202

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	S	DELETE
NAME	MCCARTHY, MADELINE B	
STREET ADDRESS	9465 GREENHILL CT	
CITY - ST - ZIP	RICHMOND VA	
TITLE	AST	DELETE
NAME	SAUER, BRADFORD B	
STREET ADDRESS	204 S. ERLWOOD CT	
CITY - ST - ZIP	RICHMOND VA	
TITLE	D	DELETE
NAME	WILEY, MARY L F	
STREET ADDRESS	17 CHINN LANE	
CITY - ST - ZIP	MIDDLEBURG VA	
TITLE	D	DELETE
NAME	LEWIS, JANET P	
STREET ADDRESS	209 WEST HILLCREST AVE	
CITY - ST - ZIP	RICHMOND VA	
TITLE	PTD	DELETE
NAME	LEWIS, LAWRENCE JR	
STREET ADDRESS	209 WEST HILLCREST AVE	
CITY - ST - ZIP	RICHMOND VA	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	Change	Addition
1.2 NAME	Louise L. Foster		
1.3 STREET ADDRESS	905 Rockford Road		
1.4 CITY - ST - ZIP	High Point, NC 27262		
2.1 TITLE	VPD	Change	Addition
2.2 NAME	Janet P. Lewis		
2.3 STREET ADDRESS	209 W. Hillcrest Ave.		
2.4 CITY - ST - ZIP	Richmond, VA 23226		
3.1 TITLE	VPTD	Change	Addition
3.2 NAME	Bradford B. Sauer		
3.3 STREET ADDRESS	204 S. Erlwood Ct.		
3.4 CITY - ST - ZIP	Richmond, VA 23229		
4.1 TITLE	VPD	Change	Addition
4.2 NAME	Mary L. F. Wiley		
4.3 STREET ADDRESS	17 Chinn Lane		
4.4 CITY - ST - ZIP	Middleburg, VA 20118		
5.1 TITLE	D	Change	Addition
5.2 NAME	Lewis B. Pollard		
5.3 STREET ADDRESS	10638 Crest Hill Rd.		
5.4 CITY - ST - ZIP	Marshall, VA 22115		
6.1 TITLE	D	Change	Addition
6.2 NAME	Janet L. Sauer		
6.3 STREET ADDRESS	204 S. Erlwood Ct.		
6.4 CITY - ST - ZIP	Richmond, VA 23229		

14. I do hereby certify that the information supplied with this filing 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; 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.

SIGNATURE:

Madeline B. McCarthy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Madeline B. McCarthy

June 27, 1996
Date

804/648-5033
Daytime Phone

0018514

CR2E037 (3/96)

837106

2-2

CONTINUATION OF SECTION 13

D
Kenan L. White
115 E. Hillcrest Ave.
Richmond, VA 23226

Addition