

FILE NOW: FILING FEE IS \$61.25

Page 1 of 2

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 846723 (5)
 1. Corporation Name
THE SALVADOR DALI FOUNDATION, INC.



Principal Place of Business 1000 3RD ST., S. ST. PETERSBURG FL 33701 US	Mailing Address 1000 3RD ST., S. ST. PETERSBURG FL 33701 US
--	--

3. Date Incorporated or Qualified 08/14/1980	3a. Date of Last Report 04/06/1995
4. FEI Number 34-6527073	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26 1000 3rd St. So.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Country 25	Zip 29
Country 25	Country 30

9. Name and Address of Current Registered Agent

**MARTIN, JAMES W.
 201 SECOND AVENUE N. STE. C
 ST. PETERSBURG FL 33701**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN, JAMES W.	1.2 NAME	
STREET ADDRESS	201 SECOND ST.; S.	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	1.4 CITY-ST-ZIP	
TITLE	PT	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORSE, A. R.	2.2 NAME	
STREET ADDRESS	1000 THIRD ST., S.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	2.4 CITY-ST-ZIP	
TITLE	TV	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORSE, BRAD G	3.2 NAME	
STREET ADDRESS	1000 THIRD ST. SOUTH	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	
TITLE	TAS	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROUSSEAU, T. M	4.2 NAME	
STREET ADDRESS	1000 THIRD ST., SOUTH	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	4.4 CITY-ST-ZIP	
TITLE	VT	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES, THOMAS A	5.2 NAME	
STREET ADDRESS	C/O RAYMOND JAMES FINANCIAL, 880 CARILLON	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	5.4 CITY-ST-ZIP	
TITLE	TTT	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOUGH, WILLIAM R	6.2 NAME	
STREET ADDRESS	100 SECOND AVE., S.	6.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	6.4 CITY-ST-ZIP	

See Attached List

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)(c), 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: _____ DATE: **3-14-96** DAYTIME PHONE #: **813 8210904**

CR2E037 (12/95)

846723

2 of 2

ATTACHMENT TO 1996 ANNUAL REPORT TO FLORIDA DEPARTMENT OF STATE
THE SALVADOR DALI FOUNDATION, INC.

Document #846723

OFFICERS AND TRUSTEES

As of March 14, 1996

Trustee and Chairman
A. REYNOLDS MORSE
1000 Third Street South
St. Petersburg, FL 33701

Trustee and Assistant Treasurer
ELEANOR R. MORSE
1000 Third Street South
St. Petersburg, FL 33701

Trustee and Vice President
BRAD G. MORSE
1000 Third Street South
St. Petersburg, FL 33701

Trustee and President
THOMAS A. JAMES
1000 Third Street South
St. Petersburg, FL 33701

Trustee and Secretary
JAMES W. MARTIN
201 Second Avenue North Suite C
St. Petersburg, FL 33701

Trustee and Treasurer
WILLIAM R. HOUGH
1000 Third Street South
St. Petersburg, FL 33701

Trustee and Assistant Secretary
T. MARSHALL ROUSSEAU
1000 Third Street South
St. Petersburg, FL 33701

Trustee and Assistant Secretary
MARGO C. EURE
1000 Third Street South
St. Petersburg, FL 33701