## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## F93000004244 (0)

JEREMIAH FOUNDATION, INC.						
Principal Place of Business Mailing Add						r regitage tisse sacon sittl gablit mellit mattit mattit mattit einelt einelt einet (681
110 N. RIVER JUPITER FL 33		110 N. RIVER DRIVE WES JUPITER FL 33458	10 N. RIVER DRIVE WEST UPITER FL 33458			3. Date Incorporated or Qualified  09/17/1993  4. FEI Number  Applied For
2 Principal 6	Place of Rusiness	2a. Mailing Address				05-0462855   Not Applicable
Principal Place of Business     Principal Place of Business		26			5. Certificate of Status Desired S8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Added to Fees	
City & State		City & State			7. Is this nonprofit corporation a homeowners association?	
Zip Country		Zip Country		'	8. This corporation owes or has paid the current year intangible	
24	25	29				Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent
				81	Name	
	EY, MICHAEL T			82	Street Addre	ess (P.O. Box Number is Not Acceptable)
1	river drive west R FL 33458			83		
JOPHER	1 FL 00400					
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida State	ites, the a	bove	e-named corpo	
agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	ations of, Section 617.0503, F	lorida Sta	o by tutes	, the corporate s.	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
SIGNATURE						
12,	Signature, typed or printed name of registered ap	pent and title if applicable. (NO ND DIRECTORS	TE: Registers	d Age	ent signature require	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DCP	DELETE	1.1 TI	TLE		Change Addition
NAME	HARTNEY, MICHAEL T		1.2 N		1	<del>-</del> -
STREET ADDRESS	110 N. RIVER DR. WEST	1.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP	JUPITER FL 33458		1.4 CITY - ST - ZIP		T- ZIP	
TITLE	DVC			TLE	ĺ	Change Addition
NAME	HARTNEY, SHERYL J		2.2 NAME			
STREET ADDRESS	110 N. RIVER DR. WEST		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		ì	ge 6,
CITY-ST-ZIP TITLE	JUPITER FL 33458	D DELETE 3.1			or-zir	☐ Change ☐ Addillon
NAME	MADEIRA, DAVID L		3.2 N			
STREET ADDRESS	22 SALISBURY RD.	JISBURY RD. 3.3			ADDRESS	
CITY-ST-ZIP	BARRINGTON RI 02806	·	3.4. C	ITY-S	T-ZIP	
TATLE	DT	☐ DELETE	4,1 TI	TLE		☐ Change ☐ Addition
NAME	WASHBURN, ROBERT E		4. 2 N			
STREET ADDRESS	59 BAGGYWRINKLE COVE		- 1		ADDRESS	
CITY-ST-ZIP TITLE	WARREN RI 02885	DELETE	4,4 CI 5,1 TI		1-ZIP	☐ Change ☐ Addillon
NAME	KINDER, RALPH M		5.2 N			
STREET ADDRESS	1 485 0001141105414 4155		1		ADDRESS	
CITY-ST-ZIP	PROVIDENCE RI 02906		5.4 CI		j j	
TITLE	√P	DELETE	6.1 TI			☐ Change ☐ Addition
NAME	HARTNEY, SHERYL J		6.2 N/	AME		
STREET ADDRESS	110 N. RIVER DR. WEST				ADDRESS	
CITY CT 710	II IPITER EL 33458		0.4.00	TV 67	* ***	

14. Thereby certify that the information supplied with this filling 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 or an attachment with an address. 401)