

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 # N03218 (7)

1. Corporation Name

HAYWOOD FOUNDATION, INC.



Principal Place of Business

Mailing Address

C/O OLIVER G. HAYWOOD
5585 LAS BRISAS DRIVE
VERO BCH FL 32967
US

C/O OLIVER G. HAYWOOD
5585 LAS BRISAS DRIVE
VERO BEACH FL 32967
US

3. Date Incorporated or Qualified

05/22/1984

3a. Date of Last Report

04/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

23-7028521

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

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

HAYWOOD, OLIVER G.
5585 LAS BRISAS DRIVE
VERO BEACH FL 32967

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DPT ☐ DELETE

NAME HAYWOOD, OLIVER G.
STREET ADDRESS 5585 LAS BRISAS DRIVE
CITY - ST - ZIP VERO BEACH FL

1.1 TITLE ☐ Change ☐ Addition

TITLE DV ☐ DELETE

NAME HAYWOOD, ROBERT C
STREET ADDRESS 31251 EAGLE CREST LANE
CITY - ST - ZIP EVERGREEN CO

2.1 TITLE ☐ Change ☐ Addition

TITLE DS ☐ DELETE

NAME HAYWOOD, BARBARA A.
STREET ADDRESS 5585 LAS BRISAS DRIVE
CITY - ST - ZIP VERO BEACH FL

3.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME HAYWOOD, MARIALYS G
STREET ADDRESS 31251 EAGLE CREST LANE
CITY - ST - ZIP EVERGREEN CO

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

SIGNATURE:

Oliver G. Haywood
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/96
Date

581-563-2998
Daytime Phone #

0016403

CP2E037 (3/96)