1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N06273

ELLIS FOUNDATION, INC.

Principal Place of Business Mailing Address					•
		POST OFFICE BOX 1879			
SUITE 1 TARPON SPRINGS FL 34689		TARPON SPRINGS FL 34688 US			
US 05					,, <u></u>
				ļ	
2. Principal Pl	ace of Business	2a. Mailing Address	.	3. Date Incorporated or Qualifed	
21		26		11/21/1984	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	_	4. FEI Number	Applied For
22		27		59-24716 <u>38</u>	Not Applicable
City & State	8	City & State	-	5. Certifcate of Status Desired	\$8.75 Additional
23		28		3. Certificate of Status Desired	Fee Required
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 May Be
24	25	29 30)	Trust Fund Contribution	Added to Fees
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	red Agent
	•		81 Name	JOHN F. PACE	
GIBSON, STANLEY G, JR.			82 Street Ade	dress (P.O. Box Number is Not Acceptable)	
3191 EDGEMOOR DR			2.3		
PALM HARBOR FL 34685			83		
TALIT TANDOTT E 01000			84 City		85 Zip Code
			I I		FL 124689
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 any amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE White Stage Stage					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					Ē. T.
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	(PD /	☐ DELETE	1.1 TITLE		Change Addition
NAME j	GHBSON, STANLEY G JR.		1.2 NAME		
STREET ADDRESS	3191 EDGEMOOR DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MARTIN, PAUL W		2.2 NAME		
STREET ADDRESS	518 RIVERSIDE DRIVE		2.3 STREET ADDRESS		ļ
CITY-ST-ZIP	TARPON SPRINGS FL		2. 4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MARTIN, CAROL E		3.2 NAME		ļ
STREET ADDRESS	518 RIVERSIDE DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	TARPON SPRINGS FL 34689		3.4. CITY-ST-ZIP	_	
TITLE	S	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HIMONETOS, MARY		4. 2 NAME		
STREET ADDRESS	625 N LEVIS AVENUE		4.3 STREET ADDRESS		
CITY-ST-ZIP	TARPON SPRINGS FL		4.4 CITY-ST-ZIP		ļ
TITLE	ST ST	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HIMONETOS, MARY		5.2 NAME		
STREET ADDRESS	625 N LEVIS AVE		5.3 STREET ADDRESS		ŗ
	TARPON SPRINGS FL 34689		5.4 CITY-ST-ZIP		ĺ
CITY-ST-ZIP	IANTON OFFINOS FL 34009				

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 on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

□ DELETE

515199

33624

5608 Pinnacle Heights Circle #303

PACE, JOHN F.

Tampa, FL

FILED

05-07-1999 90119 030 ****61.25

May 07, 1999 8:00 am § Secretary of State

Change

X Addition