

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90081 016 ****70.00

DOCUMENT # N07513

1. Corporation Name

THE RIVER REGION FOUNDATION, INC.

Principal Place of Business

660 PARK STREET
JACKSONVILLE FL 32204
US

Mailing Address

660 PARK STREET
JACKSONVILLE FL 32204
US

95508 90081 16



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

26

02/06/1985

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

Applied For

27

59-2539828

Not Applicable

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

28

Zip

Country

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUSS, ROBERT V.
112 WEST ADAMS ST., SUITE #1402
JACKSONVILLE FL 32202

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input checked="" type="checkbox"/> DELETE	P WHILDEN, BARRY A. PO BOX 41490 N/A JACKSONVILLE FL 32203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	1.1 TITLE Director 1.2 NAME Warfel, Richard H. 1.3 STREET ADDRESS 660 Park Street 1.4 CITY-ST-ZIP Jacksonville, FL 32204
<input type="checkbox"/> DELETE	TD ALLRED, BARRY 4501 BEVERLY AVENUE JACKSONVILLE FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	2.1 TITLE Director 2.2 NAME McCall, L.E. 2.3 STREET ADDRESS 660 Park Street 2.4 CITY-ST-ZIP Jacksonville, FL 32204
<input type="checkbox"/> DELETE	SD DUSS, ROBERT V 112 W. ADAMS STREET JACKSONVILLE FL 32202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	3.1 TITLE President 3.2 NAME Deters-Smith, Gretchen 3.3 STREET ADDRESS 346 Magnolia Street 3.4 CITY-ST-ZIP Jacksonville, Beach, FL 32233
<input checked="" type="checkbox"/> DELETE	PED HATFIELD, RICHARD 12930 JUNIPER HILLS CIR. S. JACKSONVILLE FL 32225	<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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

SIGNATURE:

SIGNATURE *Robert V. Duss*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT V. DUSS

11/7/98

Date

(904) 355-0668

Daytime Phone #

CR2E037 (1/98)