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Secretary of State
09-09-1999 90004 013 ****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # N13753

Corporation Name

THE GORRIE FOUNDATION, A FLORIDA NOT FOR PROFIT CORPORATION

Principal Place of Business

**C/O FOSTER, SUSAN
6 DELEON ST., GORRIE ELEMENTARY SCHOOL
TAMPA FL 33606**

Mailing Address

**C/O FOSTER, SUSAN
705 DELEON ST., GORRIE ELEMENTARY SCHOOL
TAMPA FL 33606
US**



Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

03/07/1986

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-2852349

Applied For

Not Applicable

City & State

City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Country

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARRIS, LOUISE
705 DELEON STREET
GORRIE ELEMENTARY SCHOOL
TAMPA FL 33606**

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.

NATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OKUN, ALISON 820 S ORLEANS AVE TAMPA FL	<input checked="" type="checkbox"/> DELETE
FOSTER, SUSAN 705 DELEON STREET TAMPA FL	<input type="checkbox"/> DELETE
LEVANT, RUTH 95 LADOGA AVE. TAMPA FL	<input checked="" type="checkbox"/> DELETE
MONCH, KIM 705 DELEON STREET TAMPA FL	<input checked="" type="checkbox"/> DELETE
MOSS, CHRISTIAN 705 DELEON STREET TAMPA FL	<input type="checkbox"/> DELETE
JONES, TODD 705 DELEON STREET TAMPA FL	<input checked="" type="checkbox"/> DELETE

13.

1.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	MARILYN LUNSKIS	
1.3 STREET ADDRESS	74 Columbia Dr.	
1.4 CITY-ST-ZIP	Tampa, FL 33606	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Wright, Chris	
2.3 STREET ADDRESS	404 E. DAVIS BLVD.	
2.4 CITY-ST-ZIP	Tampa, FL 33606	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Giles, Jim	
3.3 STREET ADDRESS	526 Rhine Ave	
3.4 CITY-ST-ZIP	Tampa, FL 33606	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Murray, Anna	
4.3 STREET ADDRESS	122 Adalia Ave	
4.4 CITY-ST-ZIP	Tampa, FL 33606	
5.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Moss, Christina	
5.3 STREET ADDRESS	113 Biscayne Ave	
5.4 CITY-ST-ZIP	Tampa, FL 33606	
6.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Brandes, Becky	
6.3 STREET ADDRESS	464 Severn Ave.	
6.4 CITY-ST-ZIP	Tampa FL 33606	

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:

Beaudette
RECEIVED

9/6/99

813-254-7059

CR2E037 (5/99)

**THE
GORRIE
FOUNDATION**

705 w. De Leon Street
Tampa, Florida 33608

N13753
613875-90041

September 7, 1999

Annual Report Filings
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Dear Sir or Madam:

Enclosed please find the Nonprofit Corporation Annual Report for The Gorrie Foundation. We are filing in response to a second request and in apology, want to inform you that we did not receive the first request.

The Gorrie Foundation is the beneficiary of a special event on September 29, 1999 for which we must obtain a permit from the City of Tampa. We recently requested from your office a Certificate of Status as required by the permitting process. It declared that we were an active nonprofit corporation with fees paid through December of 1998. The filing of this annual report should bring us current, and we must have proof of this to apply for the permit. Since the permit takes two weeks to process, we are running short on time to apply. If there is any way we could receive official notice of our current status via FAX it would be greatly appreciated. The Foundation receives FAXES at (813)276-5676. If there are any questions or problems please contact me at (813)254-7050. Thank you in advance for all of your help.

Sincerely,



Becky Brandes
Treasurer