

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N19430 (0)**

1. Corporation Name

**THE GEORGE H. AND MILDRED B. PANUSKA FOUNDATION, INC.**



Principal Place of Business: 2500 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301  
Mailing Address: 2500 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301

3. Date Incorporated or Qualified <b>02/26/1987</b>	3a. Date of Last Report <b>04/03/1995</b>
4. FEI Number <b>65-0042134</b>	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24		29	
25		30	

9. Name and Address of Current Registered Agent

**PANUSKA, GEORGE H.  
2500 E. LAS OLAS BLVD.  
FT. LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
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 617.0523, Florida Statutes.

SIGNATURE: *Wilma B. Rack* Director DATE: *3/28/96*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PANUSKA, GEORGE H.</b>	12 NAME
STREET ADDRESS	<b>2500 E. LAS OLAS BLVD.</b>	13 STREET ADDRESS
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>	14 CITY-ST-ZIP
TITLE	<b>D</b> <input type="checkbox"/> DELETE	21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PANUSKA, MILDRED B.</b>	22 NAME
STREET ADDRESS	<b>2500 E. LAS OLAS BLVD.</b>	23 STREET ADDRESS
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>	24 CITY-ST-ZIP
TITLE	<b>D</b> <input type="checkbox"/> DELETE	31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROUSE, RAYMOND H.</b>	32 NAME
STREET ADDRESS	<b>1112 HAWKSTONE DRIVE</b>	33 STREET ADDRESS
CITY-ST-ZIP	<b>CINCINNATI OH</b>	34 CITY-ST-ZIP
TITLE	<b>D</b> <input type="checkbox"/> DELETE	41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RACK, WILMA B.</b>	42 NAME
STREET ADDRESS	<b>4050 RIVER ROAD</b>	43 STREET ADDRESS
CITY-ST-ZIP	<b>CINCINNATI OH</b>	44 CITY-ST-ZIP
TITLE	<b>D</b> <input type="checkbox"/> DELETE	51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BROWN, BART A., JR.</b>	52 NAME
STREET ADDRESS	<b>1601 NORTH 7TH STREET</b>	53 STREET ADDRESS
CITY-ST-ZIP	<b>PHOENIX AR</b>	54 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME
STREET ADDRESS		63 STREET ADDRESS
CITY-ST-ZIP		64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Wilma Rack* Director DATE: *3/28/96* 513-347-1281

CR2E037 (12/95)