

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90060 035 ****61.25

NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



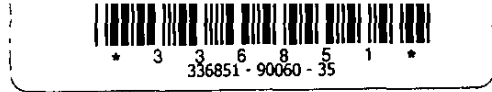
FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N19430

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



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip Country		28 Zip Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip Country		29 Zip Country		30 Zip Country	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PANUSKA, GEORGE H. 2500 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PANUSKA, MILDRED B.	1.2 NAME	
STREET ADDRESS	2500 E. LAS OLAS BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROUSE, RAYMOND H.	2.2 NAME	ROUSE, RAYMOND H.
STREET ADDRESS	1112 HAWKSTONE DRIVE	2.3 STREET ADDRESS	1648 ARDENHILL ROAD
CITY-ST-ZIP	CINCINNATI OH	2.4 CITY-ST-ZIP	CINCINNATI, OHIO
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RACK, WILMA B.	3.2 NAME	RACK, WILMA B.
STREET ADDRESS	4050 RIVER ROAD	3.3 STREET ADDRESS	1392 DENNSBURY DRIVE
CITY-ST-ZIP	CINCINNATI OH	3.4 CITY-ST-ZIP	CINCINNATI OHIO
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, BART A., JR.	4.2 NAME	
STREET ADDRESS	140 HIGHLAND AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. THOMAS KY	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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

SIGNATURE: *[Signature]* **RECEIVED** 3/19/99 915 451 8106