FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

(0)

JACQUELINE ELVIRA HODGES JOHNSON FUND, INCORPORA

	TION	ES JUMNSUN FUNU, II								
Pri	incipal Place of Business	Mailing Address	Mailing Address							
2901 38TH STREET SOUTH ST. PETERSBURG FL 33711			2901 38TH ST. GOULT. ST. PETERSBURG FL 33711 - 3732							
		US	US						Date of Last Report 02/10/1995	
2. 21	Principal Place of Business	2a. Mailing Addres	2a. Mailing Address			4.	FEI Number 59-2817577		Applied For Not Applicable	
21	Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.	Certificate of Status Desired	\$8.75 Additional Fee Required		
	City & State	City & State	City & State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
23				Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No				
24	9. Name and Address of Current Registered Agent			1		10.	Name and Address of New P	egistered	Agent	
WALKER, RICHARD J. 3597 ABINGTON AVENUE SOUTH ST. PETERSBURG FL 33711					Name Street Addr					
	Pursuant to the provisions of Sections	84		ration s	ubmits this statement for the Du	Floose of c	hanging its registered office			
1	 Pursuant to the provisions of Sections or registered agent, or both, in the Sta familiar with, and accept the obligation 	te of Florida. Such change was a	umonzea by me	corp	poration's boa	ard of di	rectors. I hereby accept the app	ointment a	as registered agent. I am	
8	IGNATURE							DATE		

SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renistating) OATE												
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS								
TITLE	C	DELETE	1.1 TITLE	Chair ferson work	Change	☐ Addition						
NAME -	JOHNSON, GEORGIA M		1.2 NAME	Georgia M. 30 HUSEV. SO. 2901 38th St.	•							
STREET ADDRESS	2901 38TH STREET SOUTH		1.3 STREET ADDRESS	2901 38" 11	> 2 > 2	כ						
	ST. PETERSBURG FL		14 CITY - ST - ZIP	st letersburg, th 511	11 - 3 / 3 /	_						
CITY-ST-ZIP TITLE	n	DELETE	2 1 TITLE	Prectoe/T	Change	Addition						
l .	UPHAUS, RUTH	~~	2.2 NAME	Ella BAUKS Court Place	-							
NAME	1246 ALZAR WAY S		2.3 STREET ADDRESS	7917 STUPING COURT								
STREET ADDRESS	ST. PETERSBURG FL		2 4 City-ST-ZiP	TAMBA FL 3361								
CITY-ST-ZIP	D.	DELETE		Director Maninesus	Change	Addition						
TITLE	WILLIAMS, CHARLES	¥ 4,	3.2 NAME	Annie M. Robinson Annie M. Robinson 3595 295 Aug. So	,							
NAME	2030 19TH ST SOUTH		33 STREET ADDRESS	3595 29th Hue. 50								
STREET ADDRESS	ST PETERSBURG FL		3.4 CITY-ST-ZIP	st Petersburg, FL 3371	l							
CITY-ST-ZIP		DELETE	4 1 TiTLE	Director	Change Change	Addition						
TITLE	D FEMMENT RESSET	Vaccera.	4 2 NAME	Paul Hodges	•							
NAME	FENNELL, JESSE L		4.3 STREET ADDRESS	30 RI 212 Ave. So.								
STREET ADDRESS	2030 19TH ST SO			St Petersburg, FL								
CITY - ST - ZIP	ST PETERSBURG FL	Kincicic	4.4 CITY - ST - ZIP 5.1 TITLE		Change	CAddition						
TITLE	D	DELETE		Prectoe		<i>CT</i> .						
NAME	FENNELL, JESSE L.		5.2 NAME	Betty Devely way So.								
STREET ADDRESS	2030 19TH STREET SO.		5 3 STREET ADDRESS	2201 LAMPRITA THE								
CITY-ST-ZIP	ST. PETERSBURG FL		5 4 CITY - ST - ZIP	st petershung FC	Change	☐ Addition						
TITLE	D	DELETE	6 1 TITLE		L.J Ostange							
NAME	WILLIAMS, CHARLES E.		6 2 NAME									
STREET ADDRESS	644 62ND AVE. S.		63 STREET ADDRESS									
CITY-ST-7IP	ST. PETERSBURG FL		6 4 CITY - ST - ZIP		an Francisco Charles	. I feetbase						

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JOHN SON 3-17-96 (813)867-9567

SIGNATURE: _