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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

N21165

(8)

RALPH E. AND JANE G. HURST FAMILY FOUNDATION, IN C.

Principal Place of Business Malling Address C/O FIDUCIARY ASSOCIATION. INC C/O FIDUCIARY ASSOCIATION. INC. 1031 WEST MORSE BOULEVARD. SUITE 100 315 1031 WEST MORSE BOULEVARD. SUITE 100 315 WINTER PARK FL 32789-3750 WINTER PARK FL 32789 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996 06/17/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2846612 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes X No 24 30 Florida Statutes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HURST, RALPH E., JR. 82 Street Address (P.O. Box Number is Not Acceptable) 863 PARK AVENUE NORTH 83 WINTER PARK FL 32789 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) DELETE 1.1 TITLE Change Addition TITLE DP NAME HURST, RALPH E., JR. 1.2 NAME **863 PARK AVENUE NORTH** 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 1.4 CITY - ST - 21P DELETE TITLE 2.1 TITLE Change Addition NAME HURST, JANE G. 2.2 NAME STREET ADDRESS 863 PARK AVENUE NORTH 2.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE BROWN, DONALD E. NAME 3.2 NAME 1031 W. MORSE BLVD, #100 STREET ADDRESS 3.3 STREET ADDRESS WINTER PARK FL CHY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City - ST - ZiP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** DITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS

6.4 City-St-ZiP

14. I do 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 or 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 chapters of on an attachment with an address.