


FILE NOW: FILING FEE IS \$61.25

FILED
Feb 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # N21711 (9)
 1. Corporation Name

FLORIDA ROCK & TANK LINES FOUNDATION, INC.



Principal Place of Business C/O RUGGLES B. CARLSON 155 EAST 21ST STREET JACKSONVILLE FL 32206-2104	Mailing Address C/O FRICK, DENNIS D P.O. BOX 4667 JACKSONVILLE FL 32201 US
---	--

3. Date Incorporated or Qualified
07/27/1987

4. FEI Number
59-2143326

Applied For
 Not Applicable

2. Principal Place of Business
21 c/o Dennis D. Frick

Suite, Apt. #, etc.
22 155 East 21st Street

City & State
23 Jacksonville

Zip
24 32206 Country **25 US**

2a. Mailing Address
26 155 East 21st Street

Suite, Apt. #, etc.
27

City & State
28

Zip
29 Country **30 US**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRICK, DENNIS D
155 E 21ST ST
JACKSONVILLE FL 32206

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** **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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME **BAKER, EDWARD L.**
 STREET ADDRESS **155 E 21ST STREET**
 CITY-ST-ZIP **JACKSONVILLE FL**

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE DELETE
 NAME **BAKER, JOHN D., II**
 STREET ADDRESS **155 E 21ST STREET**
 CITY-ST-ZIP **JACKSONVILLE FL**

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE DELETE
 NAME **CARLSON, RUGGLES B.**
 STREET ADDRESS **155 E. 21ST STREET**
 CITY-ST-ZIP **JACKSONVILLE FL**

3.1 TITLE Change Addition
 3.2 NAME **Treasurer**
 3.3 STREET ADDRESS **James Jeffrey Gilstrap**
 3.4 CITY-ST-ZIP **155 East 21st Street**
Jacksonville, FL 32206

TITLE DELETE
 NAME **HORNER, H. B**
 STREET ADDRESS **155 E 21ST STREET**
 CITY-ST-ZIP **JACKSONVILLE FL**

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME **ANDERSON, JOHN E.**
 STREET ADDRESS **155 E 21ST STREET**
 CITY-ST-ZIP **JACKSONVILLE FL**

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME **MABBETT, JOHN R. III**
 STREET ADDRESS **155 E 21ST STREET**
 CITY-ST-ZIP **JACKSONVILLE FL**

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 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.

SIGNATURE: H.B. Horner **H.B. Horner, Secretary 1-9-98 904-355-1781**

CR2E037 (10/97)