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Feb 21, 1999 8:00 am
Secretary of State

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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # N22641

1. Corporation Name

THOMAS W. FORREST FOUNDATION, INC.

90085 - 90037 - 43

Principal Place of Business
**1301 SIXTH AVE. W. #600
BRADENTON FL 34205**

Mailing Address
**1301 SIXTH AVE. W. #600
BRADENTON FL 34205**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

09/23/1987

4. FEI Number

65-0039416

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHOEMAKE, JACK, L

~~**604 51ST ST NW**~~

~~**BRADENTON FL 34209**~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
6908 Arbor Oaks Court

83

84 City
Bradenton

FL

85 Zip Code
34209

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **D FORREST, ROBERT REECE**
STREET ADDRESS **5102 38TH AVENUE WEST**
CITY-ST-ZIP **BRADENTON FL**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**11214 Pine Lilly Place
Bradenton, FL 34203**

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME **PD SHOEMAKE, JACK L**
STREET ADDRESS **604 51ST STREET NW**
CITY-ST-ZIP **BRADENTON FL**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**6908 Arbor Oaks Court
Bradenton, FL 34209**

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME **VD MILLS, F. VIRGIL**
STREET ADDRESS **700 CAMELLIA AVENUE**
CITY-ST-ZIP **ELLENTON FL**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

**3304 7th St. Cir W.
Palmetto, FL 34221**

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME **D FORREST, JACQUELYN R.**
STREET ADDRESS **5102 38TH AVENUE WEST**
CITY-ST-ZIP **BRADENTON FL**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

**11214 Pine Lilly Place
Bradenton, FL 34203**

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME **D FORREST, DORIS A.**
STREET ADDRESS **1503 10TH AVENUE WEST**
CITY-ST-ZIP **PALMETTO FL**

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 7, 1999