

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 24 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 # **N25871** (7)
1. Corporation Name
THE SCHOENBAUM FAMILY FOUNDATION, INC.



Principal Place of Business 5541 GULF OF MEXICO DRIVE E LONGBOAT KEY FL 34228 US		Mailing Address 5541 GULF OF MEXICO DRIVE E LONGBOAT KEY FL 34228 US		3. Date Incorporated or Qualified 04/12/1988	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0043921	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
22. City & State		27. City & State		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
23. Zip		28. Zip		7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
24. Country		29. Country		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 PERKINS, ROBERT E 1800 SECOND STREET SUITE 905- SARASOTA FL 34236		10. Name and Address of New Registered Agent	
		81. Name Jeffrey Diercks	
		82. Street Address (P.O. Box Number is Not Acceptable) 402 S. Westshore Boulevard	
		83. City Tampa, Florida	
		84. State FL	
		85. Zip Code 33609	

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 *(Jeffrey Diercks)* **2/18/98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SCHOENBAUM, BETTY FRANK	1.2 NAME	
STREET ADDRESS	5541 GULF OF MEXICO DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	LONGBOAT KEY FL	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SCHOENBAUM, RAYMOND D.	2.2 NAME	
STREET ADDRESS	330 GREEN GLEN WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	SCHOENBAUM, JEFFRY F.	3.2 NAME	SCHOENBAUM, JEFFRY F.
STREET ADDRESS	4201 DEEPWATER LANE	3.3 STREET ADDRESS	2966 Eagle Estates Circle West
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	Clearwater, Florida 34621
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, JOANN SCHOENBAUM	4.2 NAME	
STREET ADDRESS	1331 PRESERVATION WAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	OLDSMAR FL	4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	SCHOENBAUM, EMILY	5.2 NAME	
STREET ADDRESS	5541 GULF OF MEXICO DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	LONGBOAT KEY FL	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ 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.

SIGNATURE: *Betty Frank Schoenbaum* **2/16/98 (74) 383-2231**

CP2E037 (10/97)