

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

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1. Corporation Name

THE GALSTON FOUNDATION, INC.

Principal Place of Business

Mailing Address

467 MEADOWLARK DR.
SARASOTA FL 34236
US

467 MEADOWLARK DR.
SARASOTA FL 34236
US

3. Date Incorporated or Qualified

12/22/1988

4. FEI Number

65-0088895

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 435 L'Ambiance Drive

26 435 L'Ambiance Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Longboat Key

28 Longboat Key

Zip Country

Zip Country

24 34228

25

29 34228

30

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

WIESNER, IRA STEWART
1800 SECOND ST #870
SUITE 930
SARASOTA FL 34236

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD ☐ DELETE
NAME GALSTON, REUBEN
STREET ADDRESS 467 MEADOW LARK DRIVE
CITY - ST - ZIP SARASOTA FL

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 435 L'Ambiance Drive
1.4 CITY - ST - ZIP Longboat Key, FL 34228

TITLE D ☐ DELETE
NAME FERRIS, ROBERT D
STREET ADDRESS 2389 RINGLING BLVD SUITE D
CITY - ST - ZIP SARASOTA FL

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

TITLE D ☐ DELETE
NAME WIESNER, IRA STEWART
STREET ADDRESS 1800 SECOND ST #870
CITY - ST - ZIP SARASOTA FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

[Signature]

4/26/99