FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N31786

(9)

DENIUS FOUNDATION, INC.

						#111 B/BF1 BJB41 BJB11 #1811 B7B71 11811 1881
Principal	Place of Business	Mailing Address			n tameline i san riteti italii tamer imise	anti arkin arkil atahi alah alah alah 499t
525 YOUNG STR MELBOURNE FL 32835 US		P.O. BOX 360855 MELBOURNE FL 32936-0955				
US		US			3. Date Incorporated or Qualified 04/19/1989	3a. Date of Last Report 02/12/1996
2. Princip	oal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26			-A		59-6136787	Not Applicable
├ ── `	Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 Additional
22 City &	State	City & State				Fee Required
23	State	<u>⊢</u> , '			6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	,	Trust Fund Contribution	Added to Fees
24	25		30	,	This corporation has liability for in Florida Statutes	intangible tax under s. 199.032,
	9. Name and Address of Curr		30		10. Name and Address of New Re	
			81	Name		
DEN	IUS, HOMER R.		_			1 T.
525 YOUNG STREET			82 Street A		dress (P.O. Box Number is Not Acceptab	le)
MELBOURNE FL 32935			83			
*****	200.1112 2 02000		84	City		land 7: 0.1
						FL 85 Zip Code
onice	ant to the provisions of Sections 617.0 or registered agent, or both, in the Sta t. I am familiar with, and accept the obl	ite of Florida. Such change was al	uthorized b	v the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
SIGNATU	RE					
12.	Signature Typed or printed name of registered a	agent and title if applicable. (NOTE NDD DIRECTORS		ent signature req	uired when reinstating)	DATE
TITLE	D OFFICENS A	DELETE	13.	T	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	KEELEY,SANDRA DENIUS	C. DECENE	1.2 NAME			El cuande El vocition
STREET ADDR				r ADDOCCO		1
CITY-ST-ZIP				T ADDRESS		
TITLE	D D	DELETE	1.4 CITY-:	SI-ZIP		Change Addition
NAME	DENIUS, HOMER R.		2.2 NAME			onange recition
STREET ADDR				T ADDRESS		
CITY-ST-ZIP			2.4 CITY-			
TITLE	D D	DELETE	3.1 TITLE	31-ZIF		Change Addition
NAME	BRAY, LEILA D		3.2 NAME			First evenide - The substituti
STREET ADDR			3.3 STREET	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-			
TITLE	THE CONTROL OF	DELETE	4.1 TITLE	S. Ell		Change Addition
NAME			4.2 NAME			the seconds
STREET ADDR	ess		4.3 STREET	l		
CITY - ST - ZIP			4.4 CITY-5			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME	į		
STREET ADDR	ess		5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S			
TITLE		DELETE	6.1 TITLE	21 (4.0)		☐ Change ☐ Addition
NAME		*****	6.2 NAME		-	COMPANY
STREET ADDR	ESS		6.3 STREET	ANNRESS		
CITY OT 210			O.S STREET	AUI/ICO		

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 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.

407-2428267

FILED

Jan 22 1997 8:00am

Secretary of State