FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DOCUMENT # N34148

(9)

DIVISION OF CORPORATIONS Feb 29 1996 8:00 am Secretary of State

FILED

FLORIDA FREEDOM FOUNDATION, INC.

				_		_ 			
Principal Place of Business Mailing Address								I	1 PIBIL PIBIL IBBL
% REV. CHA	% REV. CHARLES E MI 1708 NORTH 60TH AVE	TH AVENUE							
HOLLYWOOD) FL 33021	HOLLTWOOD FL 33021	HOLLYWOOD FL 33021			3. Date Incorporated or Qualified			
2. Principal Pi	ace of Business	2a. Mailing Address						Applied For	
21		26				65-0146678			Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired S8.75 Additional Fee Required			
City & Stati	e	Orty & State				Election Campaign Financing Trust Fund Contribution		Add	00 May Be ed to Fees
Zip	Country Zip		Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30			Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Currer	nt Hegistered Agent		81	Name	10. Name and Address of New Ac	gistered	- Gent	
					Name				
	id, Charles E. Orth 60th avenue			82	Street Address (P.O. Box Number is Not Acceptable)				
	WOOD FL 33021			83					
			•	84	City			85 2	ip Code
			1	- 1	•	ation submits this statement for the purp	FL	.	·
or registe familiar w SIGNATURE	rith, and accept the obligations of, Sec	tion 617.0503, Florida Statutes	S.		oration s boar	d of directors. I hereby accept the appo	DATE	registere	u agent. i am
12.					- SQLETER OF THE PORTOR	ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12			ORS IN 12
TITLE	DP	CCORD, CHARLES E. DELETE 11		11 TITLE 12 NAME 13 STREET ADDRESS				Change	
NAME	•								
STREET ADDRESS	5901 S W 37TH AVE.								
CITY-ST ZIP		FT LAUDERDALE FL		TY - \$1	T-ZIP				
TITLE	D	DELETE 21		TLE		☐ Change ☐		☐ Addition	
NAME.	STACK, DORREN		22 N/	2 2 NAME 2 3 STREET ADDRESS					
STREET ADDRESS	6850 RALEIGH ST.		2351						
CITY ST-ZIP	HOLLYWOOD FL	OLLYWOOD FL		2 4 CHTY-ST-ZIP					
TITLE	DVT	□ DELETE 31		TLF		Change A			Addition
NAM(RUTIG, JAMES, H		3 2 N	AME					
STREET ADDRESS	***************************************		338	TREET	ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL	E ACLETE			ST - ZIP			F7 (*****	Addition
TITLE	D	DELETE	41 TI					Change	Addition
NAME	CANOTT, DONALD D		4 2 N						
STREET ADDRESS	1 -				ADDRESS				
CITY-ST-ZIP	PEMBROKE PINES FL	DELETE	4.4 C 5 1 Ti		5T-7IP			Change	Addition
TITLE		Finereig						ondings	, Journal
NAME			52 N		ADDRESS				
STREET ADDRESS	1				l				
CITY - ST - ZIP		DELETE	5 4 C		ST - ZIP			Change	Addition
TITLE		Clocker	62 N					- · · · · · · · · · · · · · · · · · · ·	
NAME ONLY LEDGERS					ADDRESS				
STREET ADDRESS	·								
CITY - ST - ZIP	T	with this filing is voluntarily fur	miched and	d00	ST-ZIP	for the exemption stated in Section 119.	07/3)(k). Fi	orida Stat	tutos 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 eath; that I am an officer or directed of the cohoration or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Biock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR McCard E

954 - 966-2350 Daytrine Phone •