

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N34953**

TEYA ALBERTANI FOUNDATION FOR INVOLVEMENT, INC.

Principal Place of Business
**378 WHOOPING LOOP
SUITE 1208
ALTAMONTE SPRING, FL
32701**

Mailing Address
**853 N. SR 434
ALTAMONTE SPRING, FL
32701**

2. Principal Place of Business
5128 Brywill Circle

2a. Mailing Address
same

21. Suite, Apt. #, etc.
Sarasota Fl 34234

22. City & State
Sarasota FL

23. Zip
34234

24. Country
FL

3. Date Incorporated or Qualified
10-30-89

3a. Date of Last Report
1995

4. FEI Number
59-2981976

5. Certificate of Status Desired
☐ Applied For
☒ Not Applicable

6. Election Campaign Financing
Trust Fund Contribution
☐ **\$8.75 Additional Fee Required**
☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
☐ Yes ☒ No

9. Name and Address of Current Registered Agent
**CLAYTON D. SIMMONS
200 W. 1st STREET, SUITE 22
SANFORD, FL 32772-1330**

10. Name and Address of New Registered Agent

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 _____ DATE _____
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

**JUDITH M. DEWALT
116 AUTUMN DR.
LONGWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

**DORIS HOUGHINS
114 WILD HOLLOW
LONGWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

**BARRY WACHOLDER
7501 NW 45th
PLANTATION, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11. TITLE
12. NAME
13. STREET ADDRESS
14. CITY - ST - ZIP

**5128 BRYWILL CIRCLE
SARASOTA FL 34234**

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY - ST - ZIP

☐ Change ☐ Addition

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY - ST - ZIP

☐ Change ☐ Addition

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY - ST - ZIP

**980001765210
-04/01/96--01109--006
***61.25**

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY - ST - ZIP

☐ Change ☐ Addition

61. TITLE
62. NAME
63. STREET ADDRESS
64. CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **Judith Dewalt**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.29.96 **9413550611**
Date Daytime Phone #
CS 4/1/96

CR2E037 (12/95)