

FILE NOW: FILING FEE IS \$61.25

FILED

May 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N36141** (2)
1. Corporation Name
ACT FOUNDATION, INC.



Principal Place of Business % CHRISTINE PRESCOTT 2813 BLAIRSTONE COURT TALLAHASSEE FL 32301	Mailing Address % CHRISTINE PRESCOTT 2813 BLAIRSTONE COURT TALLAHASSEE FL 32301
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3. Date Incorporated or Qualified

01/17/1990

4. FEI Number

59-2989962

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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

**PRESCOTT, CHRISTINE
2813 BLAIRSTONE COURT
TALLAHASSEE FL 32301**

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ADKINSON, BETTYE	
STREET ADDRESS	1513 SHARON RD	
CITY-ST-ZIP	TALLAHASSEE FL	

1.1 TITLE	D Amber Mitchell	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	4939 Tillie Lane	
1.3 STREET ADDRESS	Tallahassee, FL 32310	
1.4 CITY-ST-ZIP		

TITLE	T	<input type="checkbox"/> DELETE
NAME	PRESCOTT, CHRIS	
STREET ADDRESS	2813 BLAIRSTONE CT	
CITY-ST-ZIP	TALLAHASSEE FL 32301	

2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

TITLE	P	<input type="checkbox"/> DELETE
NAME	WILSON, BETSY	
STREET ADDRESS	2315 VINCENT DR	
CITY-ST-ZIP	TALLAHASSEE FL	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LECH, CHARLOTTE C	
STREET ADDRESS	1922 DELLWOOD DR	
CITY-ST-ZIP	TALLAHASSEE FL	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> DELETE
NAME	MCCLOUD, BARBARA	
STREET ADDRESS	1625 SPRINGWOOD DR	
CITY-ST-ZIP	TALLAHASSEE FL	

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

TITLE	RS	<input type="checkbox"/> DELETE
NAME	DONNA DYE	
STREET ADDRESS	460 MARLIN CT.	
CITY-ST-ZIP	Tallahassee, FL 32301	

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: **Christine Prescott** 4/30/98 (25) 877-7300

CR25037 (1097)