✓ NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

¥ --- 3

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N36418

THE MARGARETTA VAN R. SCHUYLER AND WILLIAM B. AN DERSON FOUNDATION, INC.

Principal Place of Business 2037 1 AVE N ST PETERSBURG FL 33713

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

C/O JOHN B GAY 8250 28TH AVE N

2a. Mailing Address

Suite, Apt. #, etc.

ST PETERSBURG FL 33710

US

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90083 035 ****61.25

Applied For

41 3800 - 80000 - 38

3. Date incorporated or Qualifed

01/26/1990

4. FEI Number

22		27					29-2002200		INOT	Application	1	
City & Sta	te		City & State				5. Certificate of Status Desired		\$8.75 Ad Fee Req			
Zip	Country	Country				6. Election Campaign Financing	-	\$5.00 N	lay Be	1		
24	25				ناخستانه ب		Trust Fund Contribution		Added to	Fees	<u> </u>	
	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
				8	1 Name	e					1	
DADE DADETT W					2 Stree		s (P.O. Box Number Is Not Accep	able)			1	
POPE, ROBERT W.					2 3050	Ar word as:	(F.O. Bux Humber to Hot Accep	шыс,				
2037 1 AVE N					3						1	
SIPEIE	RSBURG FL 33713			Ļ					1441 7/ 0		4	
				84	4 City		•	FL	85 Zip Co	ж		
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.												
12.	Signature, typed or printed name of registered agent a		(NOIE: RE	13.	ant agresun	a redraso as	ADDITIONS/CHANGES TO O		DIRECTOR	S IN 12	∤8	
·	OFFICERS AND DIRECTORS Delete					т-	72011101134311111010110101		☐ Change	Addition	(11/98)	
TITLE	I K EKS VICE C			1,1 TITLE						_		
NAME	JOHN B. GAY				-						8	
STREET ADDRESS	0000 0011111100111		3 STREET ADDRESS						CR2E037			
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TITLE	SECRET ARY	L) bereie			1			(44) evenige	٠	}	
NAME	DUNNE, JOHN			22 NAME								
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CITY-ST-ZIP	SEMINOLE FL.			2.4 CITY-					CICherre	- CT Addition	{	
TTTLE	T DIRECTUR	L	DELETE	71 IIITE		1		.`.	. Charge.	-[-] -[-0.0000011		
NAME	DOROTHY ABBOTT			3.2 NAME		Ţ				•	ļ	
STREET ADDRESS 5500 BRANCH AVE 4820 N. HIGH LAND					ET ADDRESS	\$					1	
CITY-ST-ZIP	TAMPA FL 336 03			3.4. CITY-		- 			F-7.01	[] Addition	1	
TITLE	DIRECTOR	<u>-</u> <u>L</u>	DELETE	4.1 TITLE					Change	C) wooloon	 	
NAME	TIM MCCORMICK _			4.2 NAME	be_	.e.						
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CITY-ST-ZIP	ST PETERSOURGE LOULF	DORT.	CL 33/01	4.4 CITY-S	ST-ZIP					<u> </u>	Į.	
TITLE	PRESIDENT		OELETE	5.1 TITLE					Change	Addition	l	
NAME	DODE BORGET W			5.2 NAME		İ	_				١.	
STREET ADORESS	2007 1ST AVEN 6060 5H	ORE DIE	<i>"</i> ا		ET ADORESS	s	~				ľ	
CITY-ST-ZIP	ST PETERSBURG FL GULF K	OORT.FL	33/01	5.4 CITY-9							ĺ	
TITLE] DELETE	6.1 TITLE		IK.	ATHY MOLL 900 20th St.	DIRE	< [□] Change	Addition	1	
NAME				6.2 NAME		6	900 20th St.	5				
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CITY-ST-ZIP	1			8.4 CITY-5	\$T-ZIP	حد	FEI CKSB VK	~ / (~	3 4 7 7		1	
	and that the information supplied with	this filing does r	ast auglify for the	e evemo	tion state	ed in Sec	tion 119 07/3Vi) Floods Statutes	I further cert	ify that the infi	omation		

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 it is 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 in an applicament with an address, with all other fike empowered.

SIGNATURE:

MINISTES PEQUIRED

TOTAL STATE OF PRINTED MAINE OF STONING OFFICER OR DIRECTOR

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