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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

N38638

(5)

CT	INCEDIA	EDUCATION	ENDOWMENT	FUND	INC
91.	JUSEPH	EUUGATION		LOND!	INU

ST. JO	SEPH E	DUCATION ENDOW	MENT FUN), INC,							
Principal Place	e of Business	}	Mailing Add	ress		 		f 10011101 000 11187 10110 \$4180 \$1181	: 1848 DIBII 41611 01614 BIO)		
ST. JOSEPH CHURCH 532 AVE. M., N.W.			ST. JOSEPH CHURCH 532 AVE. M., N.W. WINTER HAVEN FL 33881								
WINTER HAVEN FL 33881							3. Date Incorporated or Qualified 06/14/1990	3a. Date of Last 02/05/1	Report 1 996		
Principal Place of Business The Principal Place of Business			2a. Mailing Address 26				4. FEI Number 59-3069831		Applied For Not Applicable		
Suite, Apt #, etc.			Suite, Apt. #, etc.			1	5. Certificate of Status Desired	Fee F	Additional Required		
City & State) 		28 City & St	ate	1			Election Campaign Financing Trust Fund Contribution	☐ Added	May Be to Fees	
Zip 24		Country 25	Zip		Coun	try		8. This corporation has liability for i	intangible tax under Yes 🔀 No	s. 199.032,	
24		and Address of Current		ent	1901	•		10. Name and Address of New Re			
				·	1	1 Name			7		
SPANJE	RS, CRAIG	М .			la la	32 Street	Addres	ss (P.O. Box Number is Not Acceptab	ole)		
60-2ND ST., S.E.				ļ.	33						
WINTER	HAVEN FI	_ 33882-0860			L_						
						34 City			FL	Code	
11. Pursuant to the provisions of Sections 617.0502 apr 17.1508, 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 61 vi 103, Florida Statetes.											
SIGNATURE	Craig	M. Spangers or printed name of registered ager		7.04	TE: Plastered	Λ	•	Jan.	$\frac{14}{34}$, 1997	<u></u>	
12.	Cignature, types	OFFICERS AND		<u> </u>	3.	U	o roquiroc	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	PS IN 12	
TITLE	PD			DELETE	1.1 7171	.E	D	······	☐ Change	Addition	
NAME	BLUETT	r, anthony			1.2 NAM	AE .		aig M. Spangers			
STREET ADDRESS		E M, NW			1.3 STR	EET ADDRESS		and Street SE.	22002 -00	- ^	
CITY-ST-ZIP		r haven fl		7 55, 555		Y-ST-ZIP		nter Haven, FI.	33882-086		
TITLE	V D	U DUODELL II	L	DELETE	2.1 1111		D	unam Idamaina	☐ Change	Addition	
NAME		N, RUSSELL H.	,		2.2 NAM			rner Wiggins	DD ME		
STREET ADDRESS		KE HOWARD DR., NW R HAVEN FL				EET ADORESS		2 Hamilton Shore nter Haven, Fl.	33881		
CITY-ST-ZIP TITLE	T D	I HAVEN FL		DELETE	3.1 TITL	Y-ST-ZIP	DS	iter naven, fr.	Change	Addition	
NAME	NEAL,	NAVIN	•		3.2 NAM			ter Verrill			
STREET ADDRESS		AKE HAMILTON DR.,W	1			EET ADDRESS			Dr. NE		
CITY-ST-ZIP	l	R HAVEN FL				Y-ST-ZIP	WI	ter Haviliton Shors	3881-5713	L	
TITLE	D		j	DELETE	4.1 (TIT)		D		Change	Addition	
NAME	_	LL, PATRICIA			4. 2 NA	ME		rrell, Patricia			
STREET ADDRESS		AKE HOWARD DR., N	N		4.3 STR	EET ADDRESS			n Lake Es	states	
CITY-ST-ZIP	WINTER	R HAVEN FL			4.4 CIT	Y-ST-ZIP	Lal	ReBOX 1832 FMountai			
TITLE	D		Į	DELETE	5.1 TITL	.E	-		☐ Change	Addition	
NAME		I, MARY KATHERINE			5.2 NA)				•		
STREET ADDRESS		E. M., N.W.				EET ADDRESS	1				
CITY-ST-ZIP		R HAVEN FL		DELETE		Y-ST-ZIP			Change	Addition	
TITLE	D MIODZ	INUMENT IEVNI DEVIC	:	™ NETE (E	6.1 TITI				change	L AUGUIDA	
NAME CIDECT ADDRESS		IKOWSKI, JEAN RENE E. M., N.W.	•		6.2 NA/	ME REET ADDRESS				•	
STREET ADDRESS TO CITY - ST - ZIP		E. M., N.W. R HAVEN FL				Y-ST-ZIP					
14. I do herel	by certify tha	t the information supplied			lify for the e	exemption		in Section 119.07(3)(i), Florida Statute			
lamano	fficer or dire	on this annual report or s clor of the corporation or ir Block 13 if changed, or	the receiver or to	rustee empor	wered to ex	courate and	d that r report	ny signature shall have the same legs as required by Chapter 617, Florida S	al effect as if made u Statutes; and that my	inder oath; that / name	

SIGNATURE:

Russell H Fulton VD VD

FILED

Feb 13 1997 8:00am

Secretary of State