NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N39159

LELA AND JESSE KING SCHOLARSHIP FOUNDATION, INC.

Principal Place of Business 467 NORTH BATH CLUB BLVD NORTH REDINGTON BEACH FL 33708 Mailing Address

2700 1ST AVENUE N SAINT PETERSBURG FL 33713-8724

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90122 048 ****61.25



	Place of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 07/03/1990					
Suite, Apt.	# etc	Suite, Apt #, etc.	_			4. FEI Number			Appli	ed For
22		27				59-3014520			Not A	pplicable
City & Stat	te	City & State	_					\$8.7	5 Add	ditional
23		28				Certifcate of Status Desired		Fed	e Requ	ired
Zip	Country Zip			try		6. Election Campaign Financing		\$5.	00 м	av Be
24	[25]	29	30			Trust Fund Contribution			ded to I	
	9. Name and Address of Current		1,			10. Name and Address of New Reg	istered /	Agent		
		<u> </u>	8	31	Name					
DENUIADO	OT TABLES W			-	C+++++ A +++	/D.O. Day Marchaelia Nat Appartable				
DENHARDT, JAMES W				82	Street Address (P O. Box Number is Not Acceptable)					
2700 FIRST AVE N				33						
ST PETER	ISBURG FL 33713									
			8	34	City		FL	85	Zıp Co	de
11. Pursuant	to the provisions of Sections 617 0502	and 617.1508. Florida Statu	tes, the abo	ove-	-named corp	oration submits this statement for the pu	rpose of	changin	g its re	gistered
office or a	registered agent, or both, in the State of am familiar with, and accept the obligati	f Florida. Such change was a	authorized t	by ti	he corporation	on's board of directors. I hereby accept the	ne appoir	ntment a	is regis	tered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable INDTE	Registered A	gent	signature require	d when reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ER\$ AN			
TITLE	PD	☐ DELETE						☐ Chai	nge	Addition
NAME	KING, JESSE W.			1.2 NAME						
STREET ADDRESS			13 STRE	EET A	ADDRESS					
CITY-ST-ZIP	N REDINGTON BCH FL		14 CITY	r-\$T-	-ZIP					
TITLE	DVS	D as see						Chai	nge	☐ Addition
NAME	KING, LELA J.		22 NAM	ıε						
STREET ADDRESS			23 STR	EET /	ADDRESS					
CITY-ST-ZIP	N REDINGTON BCH_FL_		2 4 CIT	Y-ST	ZIP					
TITLE	D DELETE			3:TITLE				Cha	nge	Addition
NAME	DENHARDT, JAMES W			1E						
STREET ADDRESS					ADDRESS					
	ST PETERSBURG FL		34 CITY							
CITY-ST-ZIP TITLE	T FEIENODUNG FL	T DELETE			<u></u>			☐ Cha	nge	Addition
	VINC LEFA L		4 1 TITU 4 2 NAM					_		
NAME	KING, LELA J				ADDRESS					
STREET ADDRESS										
CITY-ST-ZIP	N REDINGTON BCH FL	☐ DELETE	5 1 TITLE		- 412			Cha	nge	Addition
TITLE		[5 2 NAM						J-	_
NAME					ADDRESS					
STREET ADDRESS	1		- 1		1					
CITY-ST-ZIP		☐ DELETE	54 CITY 6 1 TITLE		- 417			☐ Cha	nne	☐ Addition
TITLE		[DELETE	62 NAM					L 0114	. igo	
NAME										
STREET ADDRESS			- 1		ADDRESS					
CITY-ST-ZIP			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, with all other like empowered.