

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF REVENUE
Sandra B. M...
Secretary of
DIVISION OF CORPORATIONS

DOCUMENT # **N47114** (6)

1. Corporation Name

THE GOODWILL SUNCOAST FOUNDATION, INC.

Principal Place of Business

Mailing Address

PO BOX 14456
ST. PETERSBURG FL 33733-4456

PO BOX 14456
ST. PETERSBURG FL 33733-4456



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
02/03/1992

3a. Date of Last Report
05/01/1995

4. FEI Number

59-3104116

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

10. Name and Address of New Registered Agent

WAITS, R. LEE
10596 GANDY BOULEVARD
ST. PETERSBURG FL 33702

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 **R. LEE WAITS, PRESIDENT AND CEO**

Signature, typed or printed name of registered agent and title if applicable

NOTE: Registered agent signature required when reinstating!

3/27/96
DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **T**
STREET ADDRESS **WAITS, R. LEE**
CITY-STATE-ZIP **15819 REDINGTON DR,**
REDINGTON BEACH FL 33708

TITLE ☒ DELETE

NAME **CT**
STREET ADDRESS **JOHNSON, DAN R**
CITY-STATE-ZIP **ONE PROGRESS PLAZA, STE. 2500**
ST. PETERSBURG FL 33701

TITLE ☐ DELETE

NAME **ST**
STREET ADDRESS **BAYNARD, WILLIAM T**
CITY-STATE-ZIP **100 2ND AVENUE S., STE. 1202**
ST. PETERSBURG FL 33701

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☒ Addition

12 NAME **CT**
13 STREET ADDRESS **VAUGHN, EDWARD M. JR.**
14 CITY-STATE-ZIP **2825 VALENCIA LANE W.**
PALM HARBOR, FL 34684

21 TITLE ☐ Change ☒ Addition

22 NAME **T**
23 STREET ADDRESS **SIVER, ROBERT I.**
24 CITY-STATE-ZIP **801 SIXTH STREET S.**
ST. PETERSBURG, FL 33701

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: **R. LEE WAITS, PRESIDENT AND CEO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/96
Date

813/576-3819
Daytime Phone #

CR2E037 (12/95)