FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N93000003786 (1) DOCUMENT #
1. Corporation Name

NATIONAL INSTITUTE OF ETHICS, INCORPORATED

220 LIVE OAK BLVD

Principal Place of Business

appears in Block 12 or Block

Mailing Address

220 LIVE OAK BLVD

FILED Jun 02 1997 8:00am Secretary of State



BUILDING 2 BUILDING 2 CASSE PERSON SI CONTROL								
CASSELBERRY FL 32707 CASSELBERRY FL 32707-3830				3. Date Incorporated or Qualified 08/18/1993				
2. Principal Place of Business	28. Mailing Address			4. FEI Number	· 	Ap	plied For	
21 1060 W. State Bd. 42	4 28 SAME	AS	<u>s Q</u>	59-3196787		No	t Applicable	
Spite. Apt #, etc. 22 Suite 164	Suite, Apt. #, etc.			5. Certificate of Status Desired	M	\$8.75 / Fee Re	Additional equired	
City & State	City & State			6. Election Campaign Financing		\$5.00		
23 LONGWOOD FL	Z(p	Co	untry	Trust Fund Contribution 8. This corporation has liability for it	otanoible ter	Added 1	· · · · · · · · · · · · · · · · · · ·	
24 32750 25 Semino	C 29	30			Yes 24		. 189.032,	
9. Name and Address of Cu	rrent Registered Agent	10. Name and Address of New Registered Agent						
			61 Name				ł	
TRAUTMAN, NEAL E			82 Street Address (P.O. Box Number is Not Acceptable)					
220 LIVE OAK BLVD			63					
BUILDING 2								
CASSELBERRY FL 32707			B4 City		FL	85 Zip (Code	
11. Pursuant to the provisions of Sections 617	0502 and 617.1508. Florida Statute	es the a	hove-named	corporation submits this statement for the n		anaina it	e registered	
office or registered agent, or both, in the S	tate of Florida. Such change was a	authorize	d by the cor	poration's board of directors. I hereby accep	t the appoin	tment as	registered	
SIGNATURE SIGNATURE	bilgations of, addition of 17.0303, 110		80/97					
Signature, typed or printed name of registere	d agent and title if applicable. (NOT			required when reinstating)	DATE			
· · · · · · · · · · · · · · · · · · ·	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND D	RECTOR	S IN 12	
TITLE D	☐ DELETE	1.1 Ţ				Change	Addition	
NAME TRAUTMAN, NEAL E		1.2 N	AME	PRESTON COVEY Ph.D.			- * ;	
STREET ADDRESS 135 E BAHAMA ROAD		1.3 S	TREET ADDRESS	118 BAVARD ST				
CITY-ST-ZIP WINTER SPRINGS FL 327		1.40	ITY-ST-ZIP	PITISBURGH, PA 152	3			
TITLE	L DELETE	211	ITLE	D		Change	Addition	
NAME TRAUTMAN, B R		2.2 N		FRANK FOREST, Ph.D.			• •	
STREET ADDRESS 135 E BAHAMA ROAD		2.3 \$	TREET ADDRESS	2828 M. ATLANTIC AVE	.			
CITY-ST-ZIP WINTER SPRINGS FL 327		2.41	ATY+ST-ZIP	daytona beh, fl 3	2118			
NITLE D	DELETE	3.1 T	ITLE	ID a	L	Change	Addition	
NAME TRAUTMAN, JAMES H		3.2 N	AME	SINA GIOVINCO, BAD.,	PH, D., I	?,N,	′ •	
STREET ADDRESS 2906 HARRIET DRIVE		3.3 S	TREET ADDRESS	1727 6. W. 11th Aver	iue.			
CITY-ST-ZIP ORLANDO FL 32712-5814			ITY-ST-ZIP	SINA GIOVINCO, BAD., TT27 6.W. Ilth Aver Gainesville, FL B2	607			
TITLE D	☐ DELETE	4.1 T		-	L	Change	Addition	
NAME HYNES, JAMES STREET ADDRESS 479 GRAN VIEW AVENUE		4.21						
DIDOCHIOOD NIV 44005			TREET ADDRESS					
TITLE TO THE TOTAL	DELETE	4.4 C	TY-ST-ZIP			Change	Addition	
NAME TERESTONIK. ONVE	SI Du n	5.2 N			<u></u>	i cuantia	Autilion	
	REET		TREET ADDRESS	* .				
CITY-ST-ZIP PHERLINGH DY	150.13		ITY-ST-ZIP					
TITLE TO	DELETE	6.1 T		, , , , , , , , , , , , , , , , , , , ,	Γ	Change	Addition	
NAME FRANK FOREST, PA	—	6.2 N					_	
STREET ADDRESS 2828 N. ATLANTIC	ÄVE		TREET ADDRESS					
CITY-ST-ZIP DAYTONA BCH , F			ITY-ST-ZIP				1	
14. I do hereby certify that the information sup	plied with this filing does not qualif	v for the	exemption s	tated in Section 119.07(3)(i), Florida Statutes	. I further ce	ertify 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								