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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000001097 (3)

1. Corporation Name

WORLD FOREST FOUNDATION, INC.

Principal Place of Business

Mailing Address

47 CHIPPINGWOOD LN
ORMOND BEACH FL 32176

47 CHIPPINGWOOD LN
ORMOND BEACH FL 32176-7763

3. Date Incorporated or Qualified
03/06/1995

3a. Date of Last Report
04/03/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHULTZ, KARL F
47 CHIPPINGWOOD LN
ORMOND BEACH FL 32176

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME SCHULTZ, KARL F III
STREET ADDRESS 47 CHIPPINGWOOD LN
CITY-ST-ZIP ORMOND BEACH FL 32176

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME QUIROS, MANUEL A
STREET ADDRESS APDO 165 2120
CITY-ST-ZIP SAN JOSE COSTA RICA

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME DST
STREET ADDRESS SCHULTZ, KARL F
CITY-ST-ZIP 47 CHIPPINGWOOD LN
ORMOND BEACH FL 32176

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME DP
4.3 STREET ADDRESS WILLIAM BROCK
4.4 CITY-ST-ZIP 1977 Hwy 20
SEBRU - WOOLLEY, WA 98284

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME D
5.3 STREET ADDRESS EDWARD BANTLOW
5.4 CITY-ST-ZIP 9 WRIGHT PLACE
PRINCETON JUNCTION, NJ 08550

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME D
6.3 STREET ADDRESS ANNE DONATO
6.4 CITY-ST-ZIP 7516 McALLUM ST.
PHILADELPHIA, PA 19118

14. I do 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.

CR2E037 (9/96)