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Apr 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003595 (4)

1. Corporation Name

INSTITUTE FOR FLORIDA'S FUTURE, INC.

Principal Place of Business

Mailing Address

3399 PONCE DE LEON BLVD. STE 203
MIAMI FL 33134

POST OFFICE BOX 144155
CORAL GABLES FL 33114-4155



3. Date Incorporated or Qualified 07/27/1995
3a. Date of Last Report 04/28/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0659946		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		24		30	
Zip		Country		Zip		Country	
25		29		30		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARRELL, SALLY S
3399 PONCE DE LEON BLVD. STE 203
MIAMI FL 33134

81 Name	Mark Wallace		
82 Street Address (P.O. Box Number is Not Acceptable)	100 SE 2 Street		
83	Suite 2600		
84 City	Miami,	FL	85 Zip Code 33131

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.

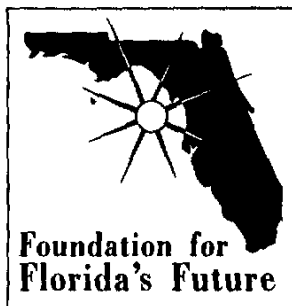
SIGNATURE *Mark Wallace* DATE 2/24/97
Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALFONSO, CARLOS	1.2 NAME	
STREET ADDRESS	1705 NO. 16TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33605	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AUSTIN, JEANIE	2.2 NAME	
STREET ADDRESS	1338 BUCKWOOD DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32806	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSH, JEB	3.2 NAME	
STREET ADDRESS	2 ALAHAMBRA PLAZA	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL 33134	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROUSE, JAY	4.2 NAME	
STREET ADDRESS	1800 2ND STREET STE 755	4.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34236	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GILL, LINDA	5.2 NAME	
STREET ADDRESS	POST OFFICE BOX 21277 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33335	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANDY, PHIL	6.2 NAME	
STREET ADDRESS	POST OFFICE BOX 3090 N/A	6.3 STREET ADDRESS	
CITY-ST-ZIP	WINTERPARK FL 32790	6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Mark Wallace* DATE 2/24/97 (305) 777-2700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)



Additional Officers and Directors

HONORARY CHAIRMAN
The Honorable Jack Kemp

CHAIRMAN
Jeb Bush

BOARD OF DIRECTORS

Carlos Alfonso
Karl Altenburger
Jeanie Austin
Kim Binkley-Seyer
Representative Allen Boyd
Bill Bull
Nora Bulnes
Bertica Cabrera
Cheryl Cliett
Senator Charlie Crist
Jay Crouse
The Honorable Miguel DeGrandy
Pramila Desai
Paula Dockery
Margaret Lynn Duggar
Ann Duncan
Audley Evans
T. Willard Fair
Kathleen Finnegan
Norene Frazier
Dr. Lois Gerber
Linda Gill
Barbara Gothard
Charlotte Greenberg
Dr. Pedro Greer
Phil Handy
Suzanne Harper
Cynthia Henderson
Charlie Hilton
Al Hoffman
Mayor Glenda Hood
Representative Buddy Johnson
Senator George Kirkpatrick
Milton Lavernia
Marc Little
Amelia Rae Maguire
Dr. Stanley Marshall
Mel Martinez
Dr. Jeane McCarthy
Clarence McKee
Representative Sharon Merchant
Flaine Miceli
The Honorable Wayne Mixson
Carol Moore
Maryanne Morse
Pam Mullarkey
Billie Neese
Wendy Nelson
Tom Petway
Herb Peyton
Sergio Pino
Jim Robinson
Carlos Salman
Betty Sembler
Linda Sherrer
The Honorable Jim Smith
Mac Stipanovich
Jacob Stuart
Ofelia Tabares
Commissioner Art Teele
Sheriff Tom Tramel
Mayor Ron Weaver
Sheriff Charlie Wells
Barbara Wilcox
Senator Charles Williams

Title: D
Name: Alfred Hoffman
Street Address: 3213 Polo Place
City, ST, Zip: Plant City, FL 33567

Title: D
Name: Buddy Johnson
Street Address: 1101 Goldfinch Drive
City, ST, Zip: Plant City, FL 33566

Title: D
Name: Billie Neese
Street Address: 600 Sunnyside Court
City, ST, Zip: Ft. Myers, FL 33919

Title: D
Name: Sergio Pino
Street Address: 431 Costanera Road
City, ST, Zip: Coral Gables, FL 33143

3399 Ponce de Leon Blvd. • Suite 203 • Coral Gables, FL 33134
Post Office Box 144155 • Coral Gables, FL 33114
305/442-0414 • Fax 305/442-2215
241 John Knox Road • Suite 101 • Tallahassee, FL 32303
904/386-5097 • Fax 904/386-5399