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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000004721

1. Corporation Name

PARTNERSHIP FOR A SUSTAINABLE FUTURE, INC.

Principal Place of Business
 6414 SOUTH DRIVE
 MELBOURNE VILLAGE FL 32904

Mailing Address
 6414 SOUTH DRIVE
 MELBOURNE VILLAGE FL 32904



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	3. Date Incorporated or Qualified 10/06/1995 4. FEI Number 59-3433237 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent GRIFFITH, PRISCILLA 6414 SOUTH DRIVE MELBOURNE VILLAGE FL 32904	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRIFFITH, PRISCILLA 6414 SOUTH DRIVE MELBOURNE VILLAGE FL 32904	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	S Mary Todd 135 Belaine Dr. Merritt Island, FL 32952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HARRISON, J 465 LANTENBACK DR SATELLITE BCH FL 32957	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	T Julia Parker 304 Pine Rd Melbourne Village, FL 32904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ZARILLO, K 760 CAJUPUT CIR MELBOURNE VILLAGE FL 32904	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	P Kim Zarillo 760 Cajuput Circle Melbourne Village, FL 32904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEEES, DIANE 21 BOUGAINVILLE DR COCOA BEACH FL 32931	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	D Priscilla Griffith 6414 South Dr Melbourne Village, FL 32904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAYES, G 463 SPOONBILL LN MELBOURNE FL 32951	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROUSSARD, WILLIAM 502 E. NEW HAVEN AVE MELBOURNE FL 32901	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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.

SIGNATURE: Kim Zarillo SIGNATURE REQUIRED

6/2/99 407.727.2434

CR2 E037 (1/98)