

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N95000004781 (9)

1. Corporation Name

FLORIDA STEWARDSHIP FOUNDATION, INC.



Principal Place of Business

621 N.W. 53RD STREET  
SUITE 240  
BOCA RATON FL 33487

Mailing Address

621 N.W. 53RD STREET  
SUITE 240  
BOCA RATON FL 33487

3. Date Incorporated or Qualified  
10/10/1995

3a. Date of Last Report  
NONE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number  
65-0616858

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLOCH, STUART E  
2600 N. MILITARY TRAIL  
4TH FLOOR  
BOCA RATON FL 33431

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☒ Addition  
12 NAME CRAIG EVANS  
13 STREET ADDRESS 1430 NW 8TH ST  
14 CITY - ST - ZIP BOCA RATON, FL 33486

21 TITLE ☐ Change ☒ Addition  
22 NAME GLENN SIMPSON  
23 STREET ADDRESS 5761 22ND AVE S.W.  
24 CITY - ST - ZIP NAPLES, FL 33999

31 TITLE ☐ Change ☒ Addition  
32 NAME DON DYER  
33 STREET ADDRESS 1604 CANYON SPRINGS RD  
34 CITY - ST - ZIP DEERHAVEN, FL 33541

41 TITLE ☐ Change ☒ Addition  
42 NAME FRANK WILKINSON, JR.  
43 STREET ADDRESS 9150 NW 17TH AVE  
44 CITY - ST - ZIP ORECHESSEE, FL 33472

51 TITLE ☐ Change ☒ Addition  
52 NAME J EDWIN ENGLISH  
53 STREET ADDRESS 1561 SPINEVIEW DR  
54 CITY - ST - ZIP LABRACK, FL 33435

61 TITLE ☐ Change ☒ Addition  
62 NAME ERNIE CALDWELL  
63 STREET ADDRESS 410 FAULKNER LANE RD  
64 CITY - ST - ZIP WINTER HAVEN, FL 33880

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/96

Date

407-995-1474

Daytime Phone #

CR2E037 (12/95)