

FILE NOW: FILING FEE IS \$61.25

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May 23 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000001227 (5)
1. Corporation Name
HARTSFIELD ELEMENTARY SCHOOL FOUNDATION, INC.



Principal Place of Business 1414 CHOWKEEBIN NENE TALLAHASSEE FL 32301	Mailing Address 1414 CHOWKEEBIN NENE TALLAHASSEE FL 32301-4704
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3. Date Incorporated or Qualified 03/05/1996	3a. Date of Last Report
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2. Principal Place of Business	2a. Mailing Address	4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
23 Zip	28 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
24 Zip	25 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
FULLER, LARINDA (Laurinda) 1414 CHOWKEEBIN NENE TALLAHASSEE FL 32301		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL

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 **Laurinda T. Fuller** (NOTE: Registered Agent signature required when reinstating) DATE **4/24/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Director <input type="checkbox"/> DELETE	1.1 TITLE	Assistant Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ray King	1.2 NAME	Wayne Green
STREET ADDRESS	1414 Chowkeebin Nene	1.3 STREET ADDRESS	1414 Chowkeebin Nene
CITY-ST-ZIP	Tallahassee, FL 32301	1.4 CITY-ST-ZIP	Tallahassee, FL 32301
TITLE	Treasurer <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rachel McCallum	2.2 NAME	
STREET ADDRESS	1414 Chowkeebin Nene	2.3 STREET ADDRESS	
CITY-ST-ZIP	Tallahassee, FL 32301	2.4 CITY-ST-ZIP	
TITLE	Assistant Director <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Paul Holzberger	3.2 NAME	
STREET ADDRESS	Tallahassee Democrat 277 N. Magnolia	3.3 STREET ADDRESS	
CITY-ST-ZIP	Tallahassee, FL 32301	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: **Ray King** *Ray King*

4/24/97

(904) 488-7322

CR2E037 (9/96)