

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000005034(1)

1. Corporation Name

Martin Luther King, Jr. Foundation of
Tarpon Springs, Inc.

Principal Place of Business

Mailing Address

1228 US Alt.19 N.

1228 US Alt.19 N.

Tarpon Springs, FL 34689

Tarpon Springs, FL
34689

3. Date Incorporated or Qualified
9/26/96

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Folkenflik, David
1266 S. Pinellas Ave.
Tarpon Springs, FL 34689

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 Pres
NAME Smith, Milton, Rev.
STREET ADDRESS 1546 River Oaks Dr.
CITY-ST-ZIP Tarpon Springs, FL 34689

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

☐ Change ☐ Addition

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TITLE Sec
NAME Perry, David, Rev.
STREET ADDRESS 979 Spinnaker Court
CITY-ST-ZIP Tarpon Springs, FL 34689

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

☐ Change ☐ Addition

TITLE V-Pres.
NAME Wright, James, Dr.
STREET ADDRESS 1228 Alt. 19 N.
CITY-ST-ZIP Tarpon Springs, FL 34689

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

☐ Change ☐ Addition

TITLE Treas.
NAME Bobotas, George, Dr.
STREET ADDRESS 1245 Florida Ave. N.
CITY-ST-ZIP Tarpon Springs, FL 34689

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME John, Joseph, Rev.
STREET ADDRESS First United Methodist Church
CITY-ST-ZIP 501 E. Tarpon Ave.
Tarpon Springs, FL 34689

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME Archie, David
STREET ADDRESS 512 Martin L. King Jr. Dr.
CITY-ST-ZIP Tarpon Springs, FL 34689

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

Rev. Milton B. Smith

Rev. Milton B. Smith

(813)943-8327

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)