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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 # N96000005034

1. Corporation Name

MARTIN LUTHER KING, JR., FOUNDATION OF TARPON SP
RINGS, FL., INC.

Principal Place of Business

400 S. LEVIS AVE.
TARPON SPRINGS FL 34689

Mailing Address

P.O. BOX 265
TARPON SPRINGS FL 34688



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 P. O. Box 283
27 Suite, Apt. #, etc.

28 City & State

Tarpon Springs, FL

29 Zip

Country

30 34688-0283

US

3. Date Incorporated or Qualified

09/26/1996

4. FEI Number

59-3406426

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

9. Name and Address of Current Registered Agent

COLE, E.L. SR.
40347 U.S. HWY. 19 N. 107
TARPON SPRINGS FL 34689

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

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, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Aug 1, 1999

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME SMITH, MILTON REV.
STREET ADDRESS 1546 RIVER OAKS DRIVE
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE DS ☒ DELETE

NAME PERRY, DAVID REV.
STREET ADDRESS 979 SPINNAKER COURT
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE VD ☒ DELETE

NAME WRIGHT, JAMES DR.
STREET ADDRESS 1228 U.S. ALT. 19 N.
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE T ☒ DELETE

NAME BOBOTAS, GEORGE JR.
STREET ADDRESS 1245 FLORIDA AVENUE N.
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE D ☒ DELETE

NAME JOHN, JOSEPH REV.
STREET ADDRESS 501 E. TARPON AVENUE
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE D ☒ DELETE

NAME ARCHIE, DAVID
STREET ADDRESS 512 E. MARTIN LUTHER KING JR. DR.
CITY-ST-ZIP TARPON SPRINGS FL 34689

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

T
Cole, E.L. Sr.
40347 US HWY 19 N. #107
Tarpon Springs, FL 34689

S
Jean Davis
444 E. Pine Street
Tarpon Springs, FL 34689

D
Ken Staack
1114 Normandy Blvd
Tarpon Springs, FL 34689

D
Barbara Forbes
508 E. Boyer Street
Tarpon Springs, FL 34689

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.0503, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Milton B. Smith 8-1-99 (727) 937-7015

CR2E037 (11/98)

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