## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # N96000005625 (6)

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98 FEB -3 PM 1:03

SECRETARY OF STATE

WYMAN FIELDS FOUNDATION, INC.				MALCANASSEE, FLORIDA		
						Principal Place of Business
101 SOUTH HALL LANE		101 SOUTH HALL LANE		3. Date Incorporated or Qualified		
SUITE 400	00724	SUITE 400		10/25/1996		
MAITLAND FL	32751	MAITLAND FL 32751		4. FEI Number	Applied For	
				59-3405782	Not Applicable	
2. Principal Place of Business		26 125 Coastle	in Fd	6. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be	
22		27 Suite 1 400		Trust Fund Contribution	Added to Fees	
City & State		City & State () C(222771		7. Is this nonprofit corporation a homeowners association?		
23		28 Senford T	<u> </u>	Yes	No	
Zip	Country	32771	Country	8. This corporation owes or has paid the g		
24	9 Name and Address of Curren		30 USA	Personal Properly Tax due June 30.	Yes No	
9. Name and Address of Current Registered Agent  B1 Name				10. Name and Address of New Registere	a Agent	
BIRLE POIG I						
BIRLE, ERIC J			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
302 MORNING GLORY DRIVE LAKE MARY FL 32746			83			
LANE MA	4NT FE 32/40					
			84 City	F	85 Zip Code	
11. Pursuant	to the provisions of Sections 617.050	2 and 617 1508. Florida Statutes	s the above-named co	rnoration submits this statement for the purpose	of changing its registered	
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.						
l	m amiliar with, and accept the obliga	mons of, section 617.0503, Flori	ida Statutes.			
SIGNATURE .	Signature, typed or printed name of registered age:	nt and title if applicable. (NOTE:	Registered Agent signature requ	uired when reinstating) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	
TITLE	PD	☐ DELET <b>E</b>	1.1 TITLE	PD 0	Change	
NAME	COUCH, J.B.		1.2 NAME /	Anthony Rerronce	•	
STREET ADDRESS	656 SEMINOLE AVENUE		1.3 STREET ADDRESS	51 Southfall Jone		
CITY-ST-ZIP	LONGWOOD FL 32750		1.4 CITY-ST-ZIP	Maitland, FR32751		
TITLE	VPD	☐ DELETE	2.1 TITLE	IPD TIE ON	Change Addition	
NAME	STEIB, MICHAEL D		2.2 NAME	latus Tefferson, PA 125 MDA	we of	
STREET ADDRESS	2111 ANDERSON STREET		2.3 STREET ADDRESS	125 MUL	rest.	
CITY-ST-ZIP	COVINGTON GA 30209		2 4 CITY-ST-ZIP	tollahance Fl 32302	٠	
TITLE	STD	☐ DELET <b>e</b>	3.1 TITLE	200002420		
NAME	BIRLE, ERIC J		3.2 NAME	-UZ/U3/36TT	.Ո1000	
STREET ADDRESS	302 MORNING GLORY DRIVE		3.3 STREET ADDRESS	*****70.00	*****70.00	
CITY-ST-ZIP	LAKE MARY FL 32748	T as as	3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		Driete	4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		ĺ	
CITY-ST-ZIP		Tociete	5.4 City-St-ZIP	4		
TITLE		☐ DELETE	6.1 TITLE	ELI), VIX	Change Addition	
NAME			6.2 NAME	XAX 1/31/1°		
STREET ADDRESS			6.3 STREET ADDRESS	19741		

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.