FILE NOW: FILING FEE IS $61.25

APPROVED AND FILED

99 JAN -8 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1994

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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N96000006214**

1. Corporation Name

FOUNDATION FOR PARTNERSHIPS IN CORRECTIONAL EXCE LLENCE, INC.

Principal Place of Business	Mailing Address
2601 BLAIR STONE ROAD TALLAHASSEE FL 32399-2500	2601 BLAIR STONE ROAD TALLAHASSEE FL 32399-2500

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 12/06/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-3440417 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

BELL, WILSON C
2601 BLAIR STONE ROAD
TALLAHASSEE FL 32399-2500

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BELL, WILSON C		1.2 NAME	
STREET ADDRESS	2601 BLAIR STONE ROAD		1.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL 32399		1.4 CITY-ST-ZIP	
TITLE	DV	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	WILLIAMS, JAMES L		2.2 NAME	
STREET ADDRESS	7447 SALISBURY RD		2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32245		2.4 CITY-ST-ZIP	
TITLE	DT	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	WITTENBERG, NANCY K		3.2 NAME	
STREET ADDRESS	2601 BLAIRSTONE ROAD		3.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL		3.4 CITY-ST-ZIP	
TITLE	DS	☐ DELETE	4.1 TITLE	☑ Change ☐ Addition
NAME	TRAVIS, ROBERT L JR		4.2 NAME	
STREET ADDRESS	~~16 N ADAMS ST~~		4.3 STREET ADDRESS	8 West Jefferson St.
CITY-ST-ZIP	QUINCY FL 32351		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	CROWELL, ELSIE		5.2 NAME	
STREET ADDRESS	200 E GAINES ST SUITE 512		5.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL 32301		5.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	MALOY, WILLIAM DR		6.2 NAME	
STREET ADDRESS	11000 UNIVERSITY PARKWAY		6.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32514		6.4 CITY-ST-ZIP	

JB 1-11-99

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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1-8-99 (850)410-4398
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)

Foundation for Partnerships in Correctional Excellence, Inc.
1999 Annual Report/ #13 addendum

7.1 D addition
7.2 Steve Hanlon
7.3 315 South Calhoun Street
7.4 Tallahassee, FL 32301

8.1 D addition
8.2 Rev. Louis Tutt
8.3 1735 Ribault Scenic Drive
8.4 Jacksonville, FL 32208

9.1 D addition
9.2 Shirley J. Boykin
9.3 2512 West Colonial Drive
9.4 Orlando, FL 32804

10.1 D addition
10.2 Ike Griffin
10.3 140 N. Orlando Ave., suite 275
10.4 Winter Park, FL 32789

11.1 D addition
11.2 George E. Matsoukas
11.3 248 Bloomfield Drive
11.4 West Palm Beach, FL 33405

12.1 D addition
12.2 Ed Kinsey
12.3 2460 N. Haverhill Road
12.4 West Palm Beach, FL 33417

13.1 D addition
13.2 Augusto Lopez-Torres, M.D.
13.3 2623 South Seacrest Blvd., suite 212
13.4 Boynton Beach, FL 33435

14.1 D addition
14.2 J. Luis Rodriguez
14.3 1451W. Cypress Creek Road, suite 100
14.4 Ft. Lauderdale, FL 33309

Foundation for Partnerships in Correctional Excellence, Inc.
#13 addendum, page 2

15.1 D addition
15.2 John A. Thompson, Jr.
15.3 4500 S.W. 42nd Ave.
15.4 Coral Gables, FL 33146

16.1 D addition
16.2 Margarita Rohaidy Delgado
16.3 3191Coral Way, suite 400
16.4 Miami, FL 33145

17.1 D addition
17.2 Saul Korn
17.3 205 20th Avenue N.E.
17.4 St.Petersburg, FL 33701

18.1 D addition
18.2 Charles Mahan, M.D.
18.3 Bruce B. Downs Blvd., Box MDC
18.4 Tampa, FL 33612

19.1 D addition
19.2 James Krog
19.3 215 S. Monroe Street, suite 601
19.4 Tallahassee, FL 32301

20.1 D addition
20.2 Rev. Abe Brown
20.3 2921 North 29th Street
20.4 Tampa, FL 33605

4841

FOUNDATION for PARTNERSHIPS in CORRECTIONAL EXCELLENCE

January 8, 1999

Hugh MacMillan
Executive Director

2601 Blair Stone Road
Tallahassee, FL 32399
Telephone: (850) 410-4399
Fax: (850) 922-2121
E-mail:macmillan.hugh
@mail.dc.state.fl.us

Annual Report Filings
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32301

RE: 1999 Annual Report/ Foundation for Partnerships in Correctional Excellence, Inc.

Dear Sir or Madam:

Enclosed please find the 1999 Annual Report for the Foundation for Partnerships in Correctional Excellence, Inc. The corporation is authorized by Chapter 944.802, F.S. which provides an exemption from filing fees.

Thank you for your assistance in this matter.

Sincerely,

Hugh MacMillan
Executive Director

W/enclosure