

FILE NOW: FILING FEE IS \$61.25

FILED
Aug 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000001746
1. Corporation Name
BECAUSE I CARE FOUNDATION, INC.

Principal Place of Business 434 W. Kennedy Blvd. Orlando, FL 32810	Mailing Address 434 W. Kennedy Blvd. Orlando, FL 32810
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3. Date Incorporated or Qualified 3/25/97	
4. FEI Number 59-3425984	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

Brent Keller
434 W. Kennedy Blvd.
Orlando, FL 32810

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	85. Zip Code

11. Pursuant to the provisions of Sections 617.0102 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]* DATE: **7/23/98**

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	Brent Keller	
STREET ADDRESS	7601 Conroy-Winderme Road	
CITY-ST-ZIP	Orlando, FL 32811	
TITLE	P	<input type="checkbox"/> DELETE
NAME	Duane Zimmerman	
STREET ADDRESS	434 W. Kennedy Blvd.	
CITY-ST-ZIP	Orlando, FL 32810	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	Wayne Gardner	
STREET ADDRESS	5395 L.B. McLeod Road	
CITY-ST-ZIP	Orlando, FL 32811	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Julie Carmody	
STREET ADDRESS	935 Greentree Drive	
CITY-ST-ZIP	Winter Park, FL 32789	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Jerry Kassab	
STREET ADDRESS	600 Courtland Street, Suite 500	
CITY-ST-ZIP	Maitland, FL 327804	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	Louis T. Hughes	
STREET ADDRESS	1461 Via Tuscany	
CITY-ST-ZIP	Winter Park, FL 32789	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	11548 Osprey Point Blvd.	
1.4 CITY-ST-ZIP	Clermont, FL 34711	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	10148 Pink Carnation Ct.	
3.4 CITY-ST-ZIP	Orlando, FL 32825	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	2000026071	
4.4 CITY-ST-ZIP	-08/04/98--01065--045	
5.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	1059 Maitland Center Commons	
5.4 CITY-ST-ZIP	Maitland, FL 32751	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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.

SIGNATURE: *[Signature]* **BRENT KELLER 6/30/98 (407) 875-3700**

CR2E037 (10/97)