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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # N97000002140

1. Corporation Name
THE DEE AND RICK RAY FOUNDATION, INC.

Principal Place of Business	Mailing Address
~~16609 VILLALENDA DE AVILA~~ ~~TAMPA FL 33613~~	~~39 SOUTH BEACH LAGOON~~ ~~HILTON HEAD SC 29928~~

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 c/o Nuray Holdings LLC	26 c/o Nuray Holdings LLC	04/09/1997
Suite, Apt. #, etc. 22 PO Box 37149	Suite, Apt. #, etc. 27 PO Box 37149	4. FEI Number 59-3444525 ☐ Applied For ☐ Not Applicable
City & State 23 Charlotte, NC	City & State 28 Charlotte, NC	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip 24 28237 Country 25 Mecklenburg	Zip 29 28237 Country 30 Mecklenburg	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~RAY, WILLIAM E~~ ~~16609 VILLALENDA DE AVILA~~ ~~TAMPA FL 33613~~	81 Name: CT CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND RD 83 84 City: PLANTATION FL 85 Zip Code: 33324

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	D	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	RAY, WILLIAM E		1.2 NAME		
STREET ADDRESS	~~16609 VILLALENDA DE AVILA~~		1.3 STREET ADDRESS	c/o Nuray Holdings LLC PO Box 37149	
CITY-ST-ZIP	~~TAMPA FL 33613~~		1.4 CITY-ST-ZIP	Charlotte, NC 28237	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	RAY, DELORES K		2.2 NAME		
STREET ADDRESS	~~16609 VILLALENDA DE AVILA~~		2.3 STREET ADDRESS	c/o Nuray Holdings LLC PO Box 37149	
CITY-ST-ZIP	~~TAMPA FL 33613~~		2.4 CITY-ST-ZIP	Charlotte, NC 28237	
TITLE	D	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	FUJITA, RICK		3.2 NAME		
STREET ADDRESS	801 EAST TRADE ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE NC 28202		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☒ Addition
NAME	~~Ast~~ MARTHA ANN KENT		4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	c/o Nuray Holding LLC PO Box 37149	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Charlotte, NC 28237	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

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~~ SIGNATURE REQUIRED Ray 4/16/99 704-332-1153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #