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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE ' Katheline Harns

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # N97 000003536 THE FLORIDA STATE DOXING Foundation, INC 707 E. Kennedy BLVd TAMPA , PL 33602

Principal Place of Business

2. Principal Place of Business

Mailing Address

707 E. Kennedy BLVd TAMPA, FL 33602

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9. Name and Address of Current Registered Agent DAVID L. WATSON 707 E, Kennedy Blyd. Through FL 33602 11. Pursuant to the provisions of Sections 617,1502 and 617,1508. Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered spays, or both, in the State of Frieda. Such change was submitted by the corporation board of directors. Thereby accept the appointment as registered office or registered spays, or both, in the State of Frieda. Such change was submitted by the corporation board of directors. Thereby accept the appointment as registered spays, or both in the State of Frieda. Such change was submitted by the corporation board of directors. Thereby accept the appointment as registered spays, or both in the State of Frieda. Such change was submitted by the corporation board of directors. Thereby accept the appointment as registered spays, or both in the State of Frieda. Such change was submitted by the corporation board of directors. Thereby accept the appointment as registered spays, or both in the State of Frieda. Such change was submitted by the corporation board of directors. Thereby accept the appointment as registered spays, or both in the State of Frieda. Such change was submitted by the corporation board of directors. Thereby accept the appointment as registered agent upon in the purpose of changing its registered office or registered spays, or both in the state of the purpose of changing its registered agent upon in the purpose of changing its registered agent upon in the purpose of change in the purpose of
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CITY-ST-ZIP ATAMINIT Sornes R ³³⁷⁷ 84 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

e and that my signature shall have the same legal effect as if made under oath; that I am an this report as required by Chapter 617, Florida Statutes; and that my name appears in ter like empowered.

SIGNATURE:

To: Dept. Of State

Division of Corporations

Date: 10-15-99

Please re-instate the corporation, after speaking to your division we determined that our renewal letters were returned to you since we moved with no forwarding address.

Sorry for any confusion,

Bragg C. Crane