

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005647

FILED  
Apr 28, 2005  
Secretary of State

**Entity Name:** HAROLD C. AND JACQUELINE F. BLADEL FOUNDATION, INC.

**Current Principal Place of Business:**

1515 RINGLING BLVD.  
3RD FLOOR  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

400 N. ASHLEY DR.  
STE. 2300  
TAMPA, FL 33602

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

INTRASTATE REGISTERED AGENT CORP.  
701 BRICKELL AVE.  
STE. 300  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FERGUSON, ARTHUR J  
Address: 1515 RINGLING BLVD.  
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete  
Name: DELANEY, PHILIP A  
Address: 1515 RINGLING BLVD  
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete  
Name: BROWN, ROBERT R  
Address: 1515 RINGLING BLVD  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT R. BROWN

D

04/28/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date