

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # N99000000236

1. Corporation Name

WHIBBS CHARITABLE FOUNDATION, INC.

Principal Place of Business

3401 Navy Boulevard
Pensacola, FL 32505

Mailing Address

3401 Navy Boulevard
Pensacola, FL 32505

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified December 31, 1998	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3549506	
22	City & State	27	City & State	Applied For Not Applicable	
23	Zip	28	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24	Country	29	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25	Country	30	Country		

9. Name and Address of Current Registered Agent

Matthews, Edsel F. Jr.
308 South Jefferson Street
Pensacola, FL 32501

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Whibbs, Mark	1.2 NAME	
STREET ADDRESS	2315 Summit Boulevard	1.3 STREET ADDRESS	6000002903006--5
CITY-ST-ZIP	Pensacola, FL 32503	1.4 CITY-ST-ZIP	-06/14/99--01015--019
TITLE	SD	2.1 TITLE	*****61.25 *****61.25
NAME	Matthews, Edsel F., Jr.	2.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2721 Blackshear Avenue	2.3 STREET ADDRESS	
CITY-ST-ZIP	Pensacola, FL 32503	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Whibbs, Vince, Sr.	3.2 NAME	
STREET ADDRESS	3260 Seville Drive	3.3 STREET ADDRESS	
CITY-ST-ZIP	Pensacola, FL 32503	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brown, Jack	4.2 NAME	
STREET ADDRESS	761 Whitney Drive	4.3 STREET ADDRESS	
CITY-ST-ZIP	Pensacola, FL 32503	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Whibbs, John P.	5.2 NAME	
STREET ADDRESS	3165 Windermere Drive	5.3 STREET ADDRESS	
CITY-ST-ZIP	Pensacola, FL 32503	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Whibbs, William P.	6.2 NAME	
STREET ADDRESS	2120 Tronjo Road	6.3 STREET ADDRESS	
CITY-ST-ZIP	Pensacola, FL 32503	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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-27-99 850-432-1300

CR2E037 (1/98)