

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P26091 (9)

1. Corporation Name

NATIONAL FOUNDATION ON GERONTOLOGY, INC.

Principal Place of Business

3647 CORTEZ ROAD W
BRADENTON FL 34210
US

Mailing Address

3647 CORTEZ ROAD W
BRADENTON FL 34210
US



3. Date Incorporated or Qualified

09/20/1989

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2724656

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CONARD, RICHARD T
3647 CORTEZ ROAD W
BRADENTON FL 34210

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 provisions of, Section 617.0503, Florida Statutes.

SIGNATURE

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

RICHARD T CONARD

(NOTE: Registered Agent signature required when not stating)

DATE

6/15/96

12. OFFICERS AND DIRECTORS

TITLE PST ☒ DELETE

NAME CONARD, RICHARD T
STREET ADDRESS 3647 CORTEZ ROAD W
CITY-ST-ZIP BRADENTON FL

TITLE S ☒ DELETE

NAME ~~CASCABIAN, KAREN~~
STREET ADDRESS ~~3647 CORTEZ ROAD W~~
CITY-ST-ZIP ~~BRADENTON FL~~

TITLE D ☐ DELETE

NAME ARMACOST, PETER D
STREET ADDRESS P.O. BOX 12556 N/A
CITY-ST-ZIP ST. PETERSBURG FL

TITLE D ☐ DELETE

NAME HAYFLICK, LEONARD D
STREET ADDRESS 36991 GREENCROFT CLOSE, P.O. BOX 89
CITY-ST-ZIP THE SEA RANCH CA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PST ☒ Change ☐ Addition

1.2 NAME CONARD, SCOTT E.
1.3 STREET ADDRESS 4313 Fannin Drive
1.4 CITY-ST-ZIP Irving, TX 75038

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D
RAFOFSKY, HARVEY
3647 Cortez Road W
Bradenton, FL 34210-3106

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(5)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/15/96

941.756.2555

CR2E037 (12/95)