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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P38113 1. Corporation Name

DREIER-PENRITH FAMILY FOUNDATION, INC.

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90106 007 ****61.25

Principal Place of Business Mailing Address			-		
3790 RANEY RD TITUSVILLE FL 32780 US		PO BOX 2607 TITUSVILLE FL 32781-2607 US			
			· -		
2 Principal F	Place of Business	2a. Mailing Address		3. Date Incorporated or Qualifed	
21 Principal P	Place of business	26 26	·	03/30/1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		36-3012144	Not Applicable
City & Sta	te	City & State		5. Certifcate of Status Desired	\$8.75 Additional
23		28		1	Fee Required
Zip	Country	* Zip	Country 30	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	9. Name and Address of Curren		30	10. Name and Address of New Regi	
			81 Name		
THE PREI	NTICE-HALL CORPORATION SYS	TEM INC	82 Street Add	iress (P.O. Box Number is Not Acceptable)	1
1201 HAYS STREET			52 Street Aud	iless (F.O. Box Number is Not Acceptable)	
SUITE 105			83		
	\$SEE FL 32301		84 City		85 Zip Code
5705 (14 (1))		•.	84 City	I consider that is also the restricted	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purp	ose of changing its registered
office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was au itions of, Section 617.0503, Flori	tnorized by the corporati da Statutes.	on's board of directors. I hereby accept the	e appointment as registered :
SIGNATURE					
SIGNATORE	Signature, typed or printed name of registered ager	nt and title if applicable /NOTE:	Registered Agent signature requin		DATE
		THE CONTROL OF THE CO	Registereo Agent signature requiri		
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
12.	OFFICERS AN				
	OFFICERS AN PTD PENRITH, CRAIG M	ID DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
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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 on an attachment with an address, with all other like empowered.