

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 NOV 13 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # **P93000042796 (1)**

1. Corporation Name

GIFTS OF LEARNING FOUNDATION, INC.

REINSTATEMENT 1996

Principal Place of Business

Mailing Address

**21 CAMBRIA RD W
PALM BEACH GARDENS FL 33418**

**21 CAMBRIA RD W
PALM BEACH GARDENS FL 33418**

3. Date Incorporated or Qualified

06/16/1993

3a. Date of Last Report

06/12/1995

4. FEI Number

65-0423813

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☒

**\$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 12553 Woodmill Drive

Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 30098

Suite, Apt. #, etc.

City & State

23 Palm Beach Gardens, FL

Zip

24 33418

Country

25 U.S.

City & State

28 Palm Beach Gardens, FL

Zip

29 33420

Country

30 U.S.

9. Name and Address of Current Registered Agent

**KNIGHT, JAMES H
21 CAMBRIA RD W
PALM BEACH GARDENS FL 33418**

10. Name and Address of New Registered Agent

81 Name

James A. Mallamo

82 Street Address (P.O. Box Number is Not Acceptable)

12553 Woodmill Drive

83

84 City

Palm Beach Gardens

FL

85 Zip Code

33418

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

James A. Mallamo, President November 4, 1996

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE

NAME **KNIGHT, JAMES H**
STREET ADDRESS **21 CAMBRIA RD W**
CITY - ST - ZIP **PALM BEACH GARDENS FL 33418**

TITLE **D** ☐ DELETE

NAME **MALLAMO, JAMES A**
STREET ADDRESS **5 BENTWOOD DR**
CITY - ST - ZIP **PALM BEACH GARDENS FL 33418**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

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

700002009247-11-20/96-01017-014

1.2 NAME

-11/20/96-01017-014

1.3 STREET ADDRESS

******388.75 ****388.75**

1.4 CITY - ST - ZIP

2.1 TITLE

P/D

2.2 NAME

Mallamo, James A

2.3 STREET ADDRESS

12553 Woodmill Drive

2.4 CITY - ST - ZIP

Palm Beach Gardens, FL 33418

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

REINSTATEMENT 1996

☐ Change ☐ Addition

☐ Change ☐ Addition

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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(3)(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 if changed, or on an attachment with an address.

SIGNATURE:

James A. Mallamo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

November 4, 1996

Date

561-691-1700
Daytime Phone #