FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N35639

(6)

FILED Mar 06 1998 8:00am Secretary of State

THE "I	am" fol	JNDATION, INC.												
Principal Place of Business Mailing Address										16411101 000 11101 01110 01100 11116 1033 01	AN OIBH OIBH A		8)) 4 8	
C/O WILLIAM J. BOOTH 33406 OHIO AVENUE RIDGE MANOR FL 33525 C/O WILLIAM J. BOOTH 33406 OHIO AVENUE RIDGE MANOR FL 33525 RIDGE MANOR FL 33525									L	3. Date Incorporated or Qualified 12/12/1989 4. FEI Number Applied For 59-2984690 Not Applicable				
Principal Place of Business 1				2a. Mailing Address 26					5.	Certificate of Status Desired		75 /	Additional quired	
Suite, Apt. #, etc.				Sulte, Apt. #, etc.					6.	Election Campalgn Financing Trust Fund Contribution	\$ 5.	00 N	May Be Fees	
City & State				City & State					7.	s this nonprofit corporation a homeo		ciation	1?	
Zip							Country			This corporation owes or has paid th		ar inte	analble	
24	25		29	 		30		,		Personal Property Tax due June 30.	Yes Yes	_] No	
	9. Name	and Address of Curre	ent Regis	tered Agent					10.	. Name and Address of New Registe	red Agent			
							81	Name						
BOOTH, WILLIAM J. 33406 OHIO AVENUE						82 Street Addres			ress (l	P.O. Box Number is Not Acceptable)				
	MANOR FL					Ī	83							
						-	84	City		· · · · · · · · · · · · · · · · · · ·	FL 85	Zip (Code	
1	to the provis registered ag am familiar w	ions of Sections 617.05 gent, or both, in the Sta lth, and accept the obli	002 and 6 te of Florio gations of	17.1508, Flor da. Such cha f, Section 61	rida Statutes ange was au 7.0503, Flori	, the ab thorized da Statu	ove- by ites.	named corpora	ooration's	on submits this statement for the purpo board of directors. I hereby accept the		ing iti nt as	s registered registered	
SIGNATURE	Signature, typed	or printed name of registered a	gent and little	If applicable.	(NOTE: I	Registered	Agen	uper erutangia t	red whe	on reinstating) Di	NTE .			
12.		OFFICERS A	ND DIREC			13.				ADDITIONS/CHANGES TO OFFICERS			_	
TITLE	PD				DELETE	1.1 TITI					∐ Cha	ange	Addition	
NAME		, WILLIAM J.				1.2 NAI								
STREET ADDRESS		OHIO AVENUE MANOR FL						NODRESS						
CITY-ST-ZIP TITLE	VD VD	NANON FE			DELETE	1.4 CIT 2.1 TITI		-212			☐ Cha	ange	Addition	
NAME	'-	IOHN C.		_		2.2 NA					-	•		
STREET ADDRESS	446E 011/1/10/00/00/00/00						2.3 STREET ADDRESS							
CITY-ST-ZIP	WEBST	ER FL				2.4 CI	Y-S1	r-ZiP		· ,	٠			
TITLE	STD				DELETE	3.1 TITI	LE				☐ Cha	inge	Addition	
NAME		LL, RUBERT				3.2 NAI								
STREET ADDRESS		IX 534 N/A Chee fl						ADDRESS						
CITY-ST-ZIP TITLE	LACOU	UNEE FL		T1	DELETE	3.4. CIT 4.1 TIT		I-ZIP			☐ Cha	inge	☐ Addition	
NAME						4. 2 NA							-	
STREET ADDRESS								ADDRESS						
CITY-ST-ZIP						4.4 CIT	Y-ST	- ŽIP						
TITLE					DELETE	5.1 TITI	LE				Cha	inge	☐ Addition	
NAME						5.2 NA								
STREET ADDRESS	1							ADDRESS						
CITY-ST-ZIP	ļ .			<u> </u>	DELETE	5.4 CIT	-	-ZIP			☐ Cha	nne	Addition	
TITLE	Į.				PLEETE	6.1 T(T)	LE					1110		
NAME						g O MAR	uic.							
STREET ADORESS						6.2 NA/		ADDRESS						

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 enter the corporation of th