CC	NONPROFIT DRPORATION NUAL REPORT 1996		A DEPARTMEN Sandra B. Mor Secretary of S ON OF CORPO	tham state			
1. Corporat	JMENT # N22 CK FAMILIES OF AMERIC	γ.	7)) HATHURI DIR HITIP HARRI INDIR DIN	li Bibi Didio Bidai dei	Oli Biğli Biğli Biğli John
Principal Pla	ace of Business	Mailing Address					
NVERA L. ROUTE 1. TALLAHASS		%VERA L. MCINT ROUTE 1. BOX 7 TALLAHASSEE FI	721		Date Incorporated or Qualified		
Dringing!	Diam of D	······································			08/21/1987		f Last Report 31/1995
z. Priricipai	Place of Business	2a. Mailing Addres	SS		4. FEI Number 26-7821180		Applied For
Suite, Ap		Suite, Apt. #, e	etc.		5. Certificate of Status Desired	\$	Not Applicable 8.75 Additional Fee Required
City & Sta		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip]	Country 25	Z _I p	30	ountry	8. This corporation has liability for	ntangible tax un	
	9. Name and Address of C		[30]		Florida Statutes [10. Name and Address of New R	Yes ☐ No egistered Ager	nt
	: 1, BOX 721 HASSEE FL 32312			83			
TALLAH	to the provisions of Sections 617	.0502 and 617.1508, Florida S Florida: Such change was au	Statutes, the althorized by the	84 City	orporation submits this statement for the purp board of directors. I hereby accept the appo	500 pose of changing bintment as regis	
1. Pursuant or registe familiar v	to the provisions of Sections 617 ered agent, or both, in the State of with, and accept the obligations of, Signature, biped or printed name of registere.	Section 617.0503, Florida Sta diagent and title if applicable	atutes.	84 City	prporation submits this statement for the purposard of directors. I hereby accept the appo	pose of changing intrent as regis	
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