SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N38016

(4)

FILED Sep 12 1997 8:00am Secretary of State

PASCO FAMILY PROTECTION TEAM, INC.)(<u> </u>		
Principal Place	of Business	Mailing Address			- 1908/1074 800 11194 18411 83181 11845 8			
7511 LITTLE RD. BLDG. C. 7511 LITTLE RD. BLDG. C. NEW PORT RICHEY FL 34654 NEW PORT RICHEY FL 34654			DO NOT WRITE IN THIS SPACE		E			
					3. Date Incorporated or Qualified 05/07/1990	3a. Date of 02/20	Last Report 0/1996	
2. Principal Pl	ace of Business	2a, Mailing Address			4. FEI Number	1	Applied For	
21		26			59-3010807		Not Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additions			
22							ee Required	
City & State City & State				6. Election Campaign Financing		5.00 May Be		
23 Zip	Country Zip		Country		Trust Fund Contribution		dded to Fees	
24	25	29 3	–		 This corporation owes or has pail Personal Property Tax due June 	`		
	9. Name and Address of Curren		<u> </u>		10. Name and Address of New Reg			
81 Name								
					ith Hammond ss (P.O. Box Number is Not Acceptable)			
9436 REGENCY PARK BLVD.				60	6008 Main Street			
	CHEY FL 34668		83					
			84 City			les	Zin Code	
			"	New	Port Richey	FL 85	34653	
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 obligations of, Section \$17.0503, Florida Statutes.								
f. 2 C. C7								
SIGNATURE Signature, typed or privited name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D	· DELETE	1.1 TITLE	DP		,	nange	
NAME	MARTIN, KEN		1.2 NAME		sanne Smithwick		[}	
STREET ADDRESS	7350 STATE ROAD 52		1.3 STREET ADDRE		B 923	0000	ٳؙ	
CITY-ST-ZIP	BAYONET POINT FL	DELETE	1.4 CITY-ST-ZIP		rt Richey, FL 34673	-0923 - 23 0	nange Addition	
TITLE NAME	DV HILDEBRAND, ANN	DELLIE	2.1 TILLE 2.2 NAME	DV	ck Donovan	~ 200 0	Manage (LL) Addition (
STREET ADDRESS	7530 LITTLE ROAD		2.3 STREET ADDRE		06 0 1 -1 4			
CITY-ST-ZIP	NEW PORT RICHEY FL		2.4 CITY-ST-ZIP	J.5	u Dort Dichou Fi 3	4652	}	
TITLE	DT	DELETE	3.1 TITLE	DT	w Port Richey, FL 3	4002 文 c	nange Addition	
NAME	HAMMOND, KEITH	<u>-</u>	3.2 NAME		ke Waters			
STREET ADDRESS	6640 CONGRESS ST.		3.3 STREET ADDRE	1	35 Gall Boulevard			
CITY-ST-ZIP	NEW PORT RICHEY FL		3.4. CITY - ST - ZIP		phryhills, FL 33539			
TITLE	DT	DELETE	4.1 TITLE	Ď		X ci	nange Addition	
NAME	PETERS, MICHAEL		4, 2 NAME	An	n Hildebrand	•	Ì	
STREET ADDRESS	11836 LITTLE RD.		4,3 STREET ADDRE	ss 753	30 Little Road			
CITY-ST-ZIP	NEW PORT RICHEY FL		4.4 CITY-ST-ZIP	Nev	v Port Richey, FL 3	34654		
TITLE	D	☐ DELETE	5.1 TITLE	D	•	 ₹c	nange	
NAME	SMITHWICK, ROSEANN		5.2 NAME	Kei	ith Hammond		l	
STREET ADDRESS	8123-4 RIDGE RD		5.3 STREET ADDRE	SS 600	08 Main Street			
CITY-ST-ZIP	PORT RICHEY FL		5.4 CITY-ST-ZIP	Nev	Port Richey, FL 3	34653		
TITLE	D	DELETÉ	6.1 TITLE	D		X c	nange 🔲 Addition	
NAME	DONOVAN, JACK		6.2 NAME		chael Peters		ĺ	
STREET ADDRESS	5936 CENTRAL AVE	Λ	6.3 STREET ADDRE		336 Little Road			
CITY-ST-ZIP	NEW PORT RICHEY FL	Luith this filing along of a size	6.4 CITY-ST-ZIP	Nev	v Port Richey, FL 34	654	u that the	
information indicated on this annual report or supplied annual report of true and accurate and that my signature shall have the same legal effect as if made under oath; that								
14. I do hereby certify that the Information supplied with this filling 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 supplied ental 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 ceiver 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 or finite themselves.								

PASCO FAMILY PROTECTION TEAM, INC.

7511 Little Road, Bldg. C Pasco Professional Plaza New Port Richey, FL 34654-5531 (813) 845-8080 • FAX # (813) 848-1292

LIST OF BOARD OF DIRECTORS

Rosanne Smithwick, President Post Office Box 923 Port Richey, FL 34673-0923

Mike Waters, Treasurer C/O SunTrust Bank 5435 Gall Boulevard Zephyrhills, FL 33539

Joel Goldberg, DDS - Director 6640 Embassy Boulevard Port Richey, FL 34667

Commissioner, Ann Hildrebrand - Director 7530 Little Road New Port Richey, FL 34654

Ken Martin, Director 7326 Oelsner Street New Port Richey, FL 34652

Harold Sample, Director C/O Pasco Co. Sheriff's Office 8700 Citizen Drive New Port Richey, FL 34654 Jack Donovan, Vice President 5936 Central Avenue New Port Richey, FL 34652

Gaylon Bell, Director C/O Bell Funeral Home 7532 State Road 52 Hudson, FL 34667

Phyllis Hagedorn, Director 7150 Tanglewood Drive New Port Richey, FL 34654

Keith Hammond, Esq. - Director 6008 Main Street New Port Richey, FL 34654

Michael Peters, Director C/O State Farm Insurance 11836 Little Road New Port Richey, FL 34654

Jennifer Smith, Director 23333 Club Villas Drive Land O' Lakes, FL 34639