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Feb 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N50064 (7)
1. Corporation Name
FOOD ADDICTS ANONYMOUS, INC.



Principal Place of Business: 4623 FOREST HILL BLVD. SUITE 109-4 WEST PALM BEACH FL 33415-9120 US
Mailing Address: 4623 FOREST HILL BLVD. SUITE 109-4 WEST PALM BEACH FL 33415-9120 US

3. Date Incorporated or Qualified: 07/27/1992
4. FEI Number: 65-0348738
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business (21-24) and Mailing Address (2a-24) fields with sub-fields for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: BRINKEY, CHARLOTTE, 10718 ANDERSON LANE, LAKE WORTH FL 33467-5464

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

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 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

| | | |
|----------------|--------------------------------|--|
| TITLE | PD | <input checked="" type="checkbox"/> DELETE |
| NAME | DORENE, LEVY | |
| STREET ADDRESS | 475 W. END AVE., APT. 0-3 | |
| CITY-ST-ZIP | NORTH PLAINFIELD N. | |
| TITLE | STD | <input checked="" type="checkbox"/> DELETE |
| NAME | PATLANGLEY, ARCHER | |
| STREET ADDRESS | 380 SHERWOOD FOREST | |
| CITY-ST-ZIP | DELRAY BEACH FL | |
| TITLE | VD | <input checked="" type="checkbox"/> DELETE |
| NAME | LANGLEY-ARCHER, PAT | |
| STREET ADDRESS | 4623 FOREST HILL BLVD., #111-5 | |
| CITY-ST-ZIP | WEST PALM BEACH FL | |
| TITLE | TD | <input checked="" type="checkbox"/> DELETE |
| NAME | LEVY, DORENE | |
| STREET ADDRESS | 2698 1 TUS CT | |
| CITY-ST-ZIP | UNION NJ | |
| TITLE | VPD | <input checked="" type="checkbox"/> DELETE |
| NAME | STOUGH, JULIE | |
| STREET ADDRESS | 14732 E. BAGLEY ROAD | |
| CITY-ST-ZIP | MIDDLEBURG HEIGHTS OH | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|--------------------|--------------------------|--|
| 1.1 TITLE | PD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | PAT Archer | |
| 1.3 STREET ADDRESS | 380 Sherwood Forest Dr | |
| 1.4 CITY-ST-ZIP | DELRAY BEACH, FL 33445 | |
| 2.1 TITLE | TD | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | DEANNA FIKKINS | |
| 2.3 STREET ADDRESS | 231 NW 52ND ST | |
| 2.4 CITY-ST-ZIP | FT LAUDERDALE, FL 33309 | |
| 3.1 TITLE | VPD | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME | RAYMOND MURPHY | |
| 3.3 STREET ADDRESS | 359 LAURIE RD | |
| 3.4 CITY-ST-ZIP | WEST PALM BEACH FL 33405 | |
| 4.1 TITLE | SD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | JULIE STOUGH | |
| 4.3 STREET ADDRESS | 14732 E BAGLEY RD | |
| 4.4 CITY-ST-ZIP | MIDDLEBURG HTS, OH 44130 | |
| 5.1 TITLE | Eddie Eische | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME | Eddie Eische | |
| 5.3 STREET ADDRESS | 1821 N. WILTON #6 | |
| 5.4 CITY-ST-ZIP | LOS ANGELES, CA 90028 | |
| 6.1 TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME | KELLY GANGES | |
| 6.3 STREET ADDRESS | 226 ELDORADO AVE | |
| 6.4 CITY-ST-ZIP | TRENTON, NJ 08638 | |

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 on an attachment with an address.

SIGNATURE: _____ DATE: _____

CR2E037 (10/97)

OFFICERS AND DIRECTORS OF FOOD ADDICTS ANONYMOUS

1997-1998

| | | | |
|-------------------|----|------------|----------|
| EDDIE EISELE | | | ADDITION |
| 1821 N. WILTON #6 | | | |
| LOS ANGELES | CA | 90028-5710 | |

| | | | |
|-------------------|----|-------|----------|
| CAROLYN GROSS | | | ADDITION |
| 362 MAHOGANY GLEN | | | |
| ESCONDIDO | CA | 92026 | |

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|----------------------|----|-------|----------|
| ELISA KAMENS | | | ADDITION |
| 12207 GREEN SHOOT CT | | | |
| COLUMBIA | MD | 21044 | |

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|-------------|----|-------|----------|
| CHERIE KATZ | | | ADDITION |
| 4 LAKE AVE. | | | |
| LOUISVILLE | KY | 40206 | |

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|------------|----|-------|----------|
| DAVID KATZ | | | ADDITION |
| 4 LAKE AVE | | | |
| LOUISVILLE | KY | 40206 | |

| | | | |
|----------------------|----|-------|--------|
| DORENE LEVY | | | CHANGE |
| 475 WEST END AVE 0-3 | | | |
| NORTH PLAINFIELD | NJ | 07060 | |

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|--------------------|----|-------|----------|
| LORETTA OMOHUNDRO | | | ADDITION |
| 5204 BROOKWOOD RD. | | | |
| BALTIMORE | MD | 21225 | |

| | | | |
|--------------------------|----|-------|----------|
| GLORIA PALECEK | | | ADDITION |
| 32420 CHESTNUT RIDGE RD. | | | |
| NORTH RIDGEVILLE | OH | 44039 | |

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|----------------------------|----|-------|----------|
| FRANCINE SCHNEIDER | | | ADDITION |
| 1030 E. LANCASTER AVE #510 | | | |
| ROSEMONT | PA | 19010 | |
