NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # N51436

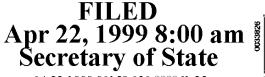
AMERICAN FOUNDATION FOR SUICIDE PREVENTION, INC. - FLORIDA DIVISION

Principal Place of Business 115 NW 167 STREET 2ND FLOOR NO MIAMI BCH FL 33169

Mailing Address

2a Mailing Address

115 NW 167 STR NO MIAMI BCH FL 33169



04-22-1999 90158 030 ****61.25



3. Date Incorporated or Qualifed

Transparence of business					_	10/22/1992)				
	WILES ROAD	16 /2360 WILES ROAD Suite, Apt. #, etc.			<u> </u>	4. FEI Number		·	Ann	lied For	
Suite, Apt. #, etc.						65-037006	4		<u> </u>	Applicable	
City & State		City & State						 	\$8.75 A		
	SPRINGS, FL	28 CORAL SPI	RINKS	. <i>F</i>	=/,	5. Certifcate of S	tatus Desired		Fee Red		
Zip	Country	Zip	Cou	intry		6. Election Camp	paign Financing		\$5.00	May Be	
433076 25 US 2933076 30						Trust Fund Co	-		Added to	-	
	9. Name and Address of Current I		<u>\</u>	<u>15</u>		10. Name and Ad	Idress of New Re	gistered .	Agent		
				81 N	lame						
CINIC MODMANI D					82 Street Address (P.O. Box Number is Not Acceptable)						
FINE, NORMAN D					921 Street Address (F.C. Dox radinosi is 1401 Acceptable)						
2000 GLADES RD										,	
STE 204											
BOCA RATON FL 33431					City			FL	85 Zip C	oae	
11 Dursuant	to the provisions of Sections 617.0502	and 617.1508. Florida Sta	tutes, the a	bove-na	amed con	poration submits this s	tatement for the pu	rpose of	changing its I	egistered	
office or r	to the provisions of Sections 617.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was	authorized	by the	corporat	ion's board of director	s. I hereby accept	the appoi	ntment as reg	istered	
agent. I a					1/2			ul.	2/99		
SIGNATURE	Signature, typed or plinted name of registered agent a	Norman (NC	DIF Registered	Apent sig	nature requir	ed when reinstating)		DATE	4117		
12.	OFFICERS AND DIRECTORS				· · · · · · · · · · · · · · · · · · ·		ANGES TO OFFI	CERS AN	D DIRECTOR	RS IN 12	
TITLE	D	☐ DELETE	1,1 Π	ΠE		2		•	Change	☐ Addition	
NAME	FINE, JOAN J		1.2 N/	AME	1 34	the state of the s					
STREET ADDRESS	7897 PALACIO DEL MAR DR		1.3 S1	TREET AD	DRESS						
	BOCA RATON FL 33433	•		TY-ST-ZII							
CITY-ST-ZIP TITLE	D	☐ DELETE		2.1 TITLE		/D:			Change	☐ Addition	
NAME	FINE, NORMAN D				-						
STREET ADDRESS	-2000_GLADES_RD,-STE-204		2.2 N	TREET AD	DRESS	·		<u>-</u>		ا بيست	
				ITY-ST-Z		•	•				
CITY-ST-ZIP	C) priete			TLE	"				Change	Addition	
	TD Greenspan, Joseph		3.2 N								
NAME	155 OCEAN BLVD.			TREET AD	ORESS			•	•		
STREET ADDRESS				RTY-ST-Z	- 1						
CITY-ST-ZIP	GOLDEN BEACH FL	☐ DELETE	3.4. C						Change	Addition	
TITLE	DOCEN HADDA M	- Desc. -	4.1 31 4, 2 N							_	
NAME	ROSEN, HARRY M	* ±		TREET AD	DOESS						
STREET ADDRESS	2500 WESTON RD, STE 220		1								
CITY-ST-ZIP	WESTON FL 33331	☐ DELETE	4.4 CI 5.1 TI	1TY-ST-ZI	-				☐ Change	Addition	
TILE	PD	- Deceie	5.1 II 5.2 N								
NAME	BACHER, NANCY W DR			TREET AD	DDEGG						
STREET ADDRESS	2875 N. E. 191ST/. PH #2										
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33180		5.4 C	ITY-ST-ZI	r				Change	Addition	
TITLE:	SD	☐ DELETE			1.			*	☐ Criange	☐ Audition	
NAME	AMODIO, MERRYL	•	6.2 N								
STREET ADDRESS	6255 N. W. 97TH AVE.			TREET AD							
CITY ST 7ID	PARKLAND EL 33076		6.4 C	ITY-ST-ZI	P						

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, with all other like empowered.

SIGNATURE:

NORMAN & FIND 4/12/99

ADDITIONS TO BLOCK 12

D GRACIA, AGUSTIN, JR PFIZER PHARMACEUTICALS 20310 S.W. 3RD STREET PEMBROKE PINES, FL 33024

D
JOYCE, THOMAS E
FIRST UNION NATIONAL BANK OF FLORIDA
77 EAST CAMINO REAL
BOCA-RATON, FL-33432

D LEWIS, FREDERICK T DR 555 S.W. 148TH AVENUE, SUITE 127 SUNRISE, FL 33325

D MENDELSON, CARROL 1475 YELLOWHEART WAY HOLLYWOOD, FL 33029

D MIDDLETON, MERRILEE R DR 10-101 ROYAL PALM WAY BOCA RATON, FL 33432

D TAITZ, ELAINE S RUBINSON 23468 MIRABELLA CIRCLE S BOCA RATON, FL 33433