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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000001053

1. Corporation Name

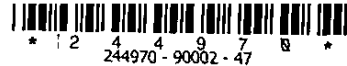
**CHILDREN'S SERVICES FOUNDATION OF HIGHLANDS COUN
TY, INC.**

Principal Place of Business

2543 US 27 SOUTH
SEBRING FL 33872 33870

Mailing Address

2543 US 27 SOUTH
SEBRING FL 33872 33870



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

02/23/1993

4. FEI Number

65-0444941

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MACBETH, ROSS J
2543 US 27 SOUTH
SEBRING FL 33872

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME L.E. "LUKE" BROOKER
STREET ADDRESS 430 S. COMMRECE
CITY-ST-ZIP SEBRING FL

TITLE D ☒ DELETE
NAME SWAINE, MARY
STREET ADDRESS 1731 BIGNONIA AVE.
CITY-ST-ZIP SEBRING FL

TITLE D ☒ DELETE
NAME WHITEHEAD, SUSAN
STREET ADDRESS 1901 U.S. 27 SOUTH
CITY-ST-ZIP SEBRING FL

TITLE D ☐ DELETE
NAME CARLAN, CLAUDETTE
STREET ADDRESS 5732 AIRPORT RD.
CITY-ST-ZIP SEBRING FL

TITLE D ☒ DELETE
NAME MCCLURE, JOHN
STREET ADDRESS 425 S. COMMERCE AVE.
CITY-ST-ZIP SEBRING FL

TITLE D ☒ DELETE
NAME ANDREWS, EMMETT
STREET ADDRESS 2237 NE LAKEVIEW DR
CITY-ST-ZIP SEBRING FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D-Chairman ☐ Change ☒ Addition
1.2 NAME HENSLEY, NANCY
1.3 STREET ADDRESS 1608 Theon Avenue
1.4 CITY-ST-ZIP Sebring, FL 33870

2.1 TITLE D-Vice Chairman ☐ Change ☒ Addition
2.2 NAME WRIGHT, ROZALYNE
2.3 STREET ADDRESS 426 School Street
2.4 CITY-ST-ZIP Sebring, FL 33870

3.1 TITLE D-TREASURER/SECRETARY ☐ Change ☒ Addition
3.2 NAME ROBERTS, KEVIN
3.3 STREET ADDRESS 7205 S. George Blvd.
3.4 CITY-ST-ZIP Sebring, FL 33872

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME COX, MARK
4.3 STREET ADDRESS 140 S. Commerce Avenue
4.4 CITY-ST-ZIP Sebring, FL 33870

5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME GENTRY, DORIS
5.3 STREET ADDRESS P.O. Box 269
5.4 CITY-ST-ZIP Avon Park, FL 33826

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME HANDLEY, SANDRA
6.3 STREET ADDRESS 2609 Orange Grove Drive
6.4 CITY-ST-ZIP Sebring, FL 33870

continued on
attached sheet

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:

Katherine Harris
Katherine Harris, Director, Treasurer/Secretary

2-26-99

941-386-6500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

244970-90002-47
N93000001053

CHILDREN'S SERVICES FOUNDATION OF HIGHLANDS COUNTY, INC.

ATTACHMENT TO NONPROFIT CORPORATION ANNUAL REPORT 1999

Continuation of 13.: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

7.1.	TITLE	D	☐ Change	☒ Addition
7.2.	NAME	McKENZIE, BUDDY		
7.3.	STREET ADDRESS	1151 Lake Lotela Dr.		
7.4.	CITY-ST-ZIP	Avon Park, FL 33825		

8.1.	TITLE	D	☐ Change	☒ Addition
8.2.	NAME	SCHOMMER, NICK		
8.3.	STREET ADDRESS	325 S. Commerce Avenue		
8.4.	CITY-ST-ZIP	Sebring, FL 33870		