### **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT ... CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

# FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90156 002 \*\*\*\*61.25

## DOCUMENT # N9500001298

Corporation Name

GOOD NEWS FOSTER HOME, INC.

Principal Place of Busines
2845 CERCY TRACE TALLAHASSEE FL 32308
US

Mailing Address

2845 CERCY TRACE TALLAHASSEE FL 32308



2. Principal Pl	ace of Business 242 1/2	2a. Mailing Address P. O.	BOX 1	2513	3. Date Incorporated or Qualifed			
21 40 114	assee FL 32303	26 Tallahassee,	FL 36	131 <i>7-251</i> 3	03/17/1995			
Suite, Apt.		Suite, Apt. #, etc.			4. FEI Number		Applied For	
22	· <del>-</del>	27			59-3293598		Not Applicable	
City & State	•	City & State			5. Certifcate of Status Desired	11	.75 Additional ee Required	
23   Zip	Country	Zip	Country		6. Election Campaign Financing	\$5	.00 May Be	
24	25 115	29 3	- 1:	5	Trust Fund Contribution		ided to Fees	
9. Name and Address of Current Registered Agent					10. Name and Address of New R	Registered Agent		
			Name \	TZADA	ad			
VEADNEY DIGHADD C				James E. Bernard				
KEARNEY, RICHARD S				82 Street Address (P.O. Box Number is Not Acceptable)				
2845 CERCY TRACE				83				
TALLAHASSEE FL 32308					<u></u>	·		
	•		84	City Tal	lahassee	FL 85	Zip Code 32303	
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.								
office of re	egistered agent, of both, in the State of m familiar with and accept the obligation	ons of, Section 617.0503, Florid	a Statutes.	ule corporation	is boding of directors. Thereby accep	A die appointment	ao regioter sa	
SIGNATURE	Xous 5 /20	waix_				3/29/99		
SIGNATURE	Signature, tiped or printed name of registered agent a			beviupen enutrangie		DATE	50 <b>7</b> 050 IV 40	
12.	OFFICERS AND		13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OF			
TITLE (	PD	☐ DELETE	1.1 TITLE	1.		<b>⊅</b> Ch	ange 🗌 Addition	
NAME	KEARNEY, RICHARD S		1.2 NAME	101	narles A. White	<b>?</b>		
STREET ADDRESS	2845 CERCY TRACE		1.3 STREET	ADDRESS 20	19 Sugar Maple Ct	F	1	
CITY-ST-ZIP	TALLAHASSEE FL 32308		1.4 CITY-ST	ZP T	allamassee, FL	·		
TITLE	VD	☐ DELETE	2.1 TITLE			Ø Ch	ange 🔲 Addition	
NAME	HORKAN, LOUISE		2.2 NAME	Hin	gela Kirkland		ľ	
STREET ADDRESS	1502 A STONE RD		2.3 STREET		76 Westover Dr.		l	
CHY-ST-ZIP -	TALLAHASSEE FL		2, 4 CITY-\$	T-ZIP G	Mahassee, FL	32363		
TITLE	<del>STD</del> .	DELETE	3.1 TITLE	T		□ Ch	nange Addition	
NAME	KEARNEY, BERNADETTE		3.2 NAME		nn McGlynn,	<b>~</b> .		
STREET ADDRESS	2845 CERCY TRACE		3.3 STREET	ADDRESS 2	906 Alobotsford W	Jay		
CITY-ST-ZIP	TALLAHASSEE FL 32308		3.4, CITY-S	T-ZIP	illahossee, FL	32312		
TITLE	D	DELETE	4.1 TITLE	51	$\supset$	□ ch	nange Addition	
NAME	KÈARNEY, IRENE	/	4. 2 NAME	Lv	nn McGymn Mana	an	<b>✓</b>	
STREET ADDRESS	3022 O'BRIEN DR		4.3 STREET	ADDRESS 38	107 Sampson Ct	3	1	
CITY-ST-ZIP	TALLAMASSEE FL		4.4 CITY-ST	·ZIP T	allahassee, FL 3	7317		
TITLE	D	DELETE	5.1 TITLE	Ď		[☐ Ch	nange Addition	
NAME	KEARNEY, JOHN	/	5.2 NAME	Jin	u Bailey		- 1/	
STREET ADDRESS	3022 O'BRIEN DR.		5.3 STREET	ADDRESS 195	55 Lawson Rd.		J	
CITY-ST-ZIP	TALLAHASSEE FL 32308		5.4 CITY-ST	-ZIP Tal	llahassee FL 32308			
TITLE		☐ DELETE	6.1 TITLE	D		□ ch	nange	
NAME			6.2 NAME	Er	ric Lewis -	M As		
STREET ADDRESS	Company of the same		6.3 STREET	ADDRESS 86	14 Bannerman Blug	H' UT.	,	
CITY ST-ZIP	٠٠ (المعالية)		6.4 CITY-ST	-ZIP Ta	Mahassee, fc 323	12		

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.

850 412 0016

389677-90156-2 #N9500001298

# Good News Foster Home, Inc.

P.O. Box 12513

Tallahassee, Florida 32317-2513 voice: (850) 412-0016 fax: (850) 412-0019

#### Add the following directors to box 12:

7.1 Title Mary Towey 7.2 Name 826 Washington Street 7.3 Street Address 7.4 City-ST-Zip Tallahassee, FL 32303

8.1 Title D

8.2 Name Jim Wilcox

515 John Knox Road 8.3 Street Address Tallahassee, FL 32303 8.4 City-ST-Zip

9.1 Title M

Jim Bernard 9.2 Name

9.3 Street Address 242 1/2 Lafayette Circle Tallahassee, FL 32303 9.4 City-ST-Zip