


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000005442 (7)

1. Corporation Name

ASSOCIATION FOR ABUSED WOMEN & CHILDREN, INC.



Principal Place of Business	Mailing Address
2549 N DIXIE LAKE WORTH FL 33460 US	2549 N DIXIE LAKE WORTH FL 33460 US

3. Date Incorporated or Qualified	11/14/1995
4. FEI Number	65-0625775
Applied For	Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
TIMMERMAN, HARRIETTE NORTH DIXIE HIGHWAY LAKE WORTH FL 33460

10. Name and Address of New Registered Agent
81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
Harriette Timmerman 160 Woodlands Rd Palm Springs, FL FL 33460

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 *Harriette Timmerman* (NOTE: Registered Agent signature required when reinstating) DATE 1-2-98

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	ASHLEY, NORMA
STREET ADDRESS	908 S LAKE DRIVE
CITY-ST-ZIP	LANTANA FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	WENNER, JUDGE RICHARD
STREET ADDRESS	300 N DIXIE
CITY-ST-ZIP	W PALM BEACH FL
TITLE	<input type="checkbox"/> DELETE
NAME	HARDAGE, DR NELL
STREET ADDRESS	138 JFK DRIVE
CITY-ST-ZIP	ATLANTIS FL
TITLE	<input type="checkbox"/> DELETE
NAME	HIGBEE, REGINA
STREET ADDRESS	915 NO DIXIE
CITY-ST-ZIP	LAKE WORTH FL
TITLE	<input type="checkbox"/> DELETE
NAME	REHAK, ROGER
STREET ADDRESS	500 NO DIXIE
CITY-ST-ZIP	LAKE WORTH FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	WYNN, PAMELA
STREET ADDRESS	513 NO O STREET
CITY-ST-ZIP	LAKE WORTH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 *Harriette Timmerman* \$61.25

CR2E037 (10/97)