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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

1. Corporation	n Name		•				Į					
SHOPL	LIFTERS ANONYMOU	s, inc.										
Principal Place of Business		,	Mailing Address					i contémi sad biini mul	Ny salin asya I	1181 81811 6	DEMDE MIMIT MEMER	B E
380 NORTH BROADWAY		3	80 NORTH BROADWAY				ĺ					
STE. 206			STE. 206				1					
JERICHO NY 11753		,	JERICHO NY 11759-2109				ŀ	3. Date Incorporated or 07/31/1990	Qualified	3a. D	03/21/1	
2. Principal Place of Business Suite, Apt. #, etc. City & State 3			2a. Mailing Address 26					4. FEI Number 22-3010584		.t.,		Applied For
			Suite, Apt. #, etc. 27 City & State 28				5. Certificate of Status Desired			\$8.75 Additional Fee Required		
								Election Campaign Financing Trust Fund Contribution			May Be	
Zip	Country		Zip	C	ountry	,		8. This corporation has li				
24	25	29		30				Florida Statutes		Yes	No.	
	9. Name and Address o	f Current Regi	stered Agent		-	l Maria		10. Name and Address of	Mew Reg	latered	Agent	
					81	Name						
LEVY, MILDRED						82 Street Ad		ress (P.O. Box Number is Not Acceptable)				
10816 WEST CLAIRMONT CIRCLE TAMARAC FL 33321		t				63						
IAMAN	au pl 33321											
					84						85 Zir	Code
					04	City				Fi	_ 1 1	
11. Pursuant	to the provisions of Sections	617.0502 and	617.1508, Florida Stati	utes, the	1	· ·	corpora	ation submits this statemer	nt for the present			its registered
11. Pursuant office or ragent. I a	to the provisions of Sections registered agent, or both, in t rm familiar with, and accept t	617.0502 and he State of Flor he obligations	617.1508, Florida Stat rida. Such change was of, Section 617.0503, I	utes, the s authoriz Florida St	1	· ·	corporation	ation submits this statemen n's board of directors. I her	nt for the preby accep			its registered s registered
11. Pursuant office or ragent. I a					above ed by atures	e-named of the corp			nt for the preby accep	urpose (t the ap		its registered s registered
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May 20 1997 8:00am

Secretary of State