

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
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90022 015 ****70.00

DOCUMENT # 707262

1. Corporation Name

THE CHILDREN'S HOME SOCIETY OF FLORIDA

Principal Place of Business

3027 SAN DIEGO RD
P O BOX 10097
JACKSONVILLE FL 32247-0097

Mailing Address

3027 SAN DIEGO RD
P O BOX 10097
JACKSONVILLE FL 32247-0097



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified

05/08/1964

4. FEI Number
59-0192430

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

WEISZ, HOWARD
3027 SAN DIEGO ROAD
JACKSONVILLE FL 32207

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 SD ☐ DELETE
NAME HALSEY, DOUGLAS
STREET ADDRESS 200 S. BISCAYNE BLVD., #4980
CITY-ST-ZIP MIAMI FL

TITLE D ☐ DELETE
NAME WARD, CRAIG B
STREET ADDRESS 105 E. ROBINSON ST., #501
CITY-ST-ZIP ORLANDO FL

TITLE TD ☒ DELETE
NAME STONE, ADELE I.
STREET ADDRESS 9430 SEA TURTLE LANE
CITY-ST-ZIP PLANTATION FL

TITLE P ☐ DELETE
NAME WEISZ, HOWARD
STREET ADDRESS 3027 SAN DIEGO RD
CITY-ST-ZIP JACKSONVILLE FL

TITLE CD ☐ DELETE
NAME ADAMS, RICHARD B. JR.
STREET ADDRESS 66 W. FLAGLER #1000
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME D
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME C
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME S BUNDY, DAVID
3.3 STREET ADDRESS 212 Pasadena Place
3.4 CITY-ST-ZIP Orlando, FL 32801

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME T TRASK, PHILIP
4.3 STREET ADDRESS 3027 San Diego Road
4.4 CITY-ST-ZIP Jacksonville, FL 32207

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME D
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 as an attachment with an address, with all other like empowered.

SIGNATURE:

Howard Weisz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/99

904/348-2840

Date

Daytime Phone #

CR2E037 (1/98)