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

**NONPROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Mar 13 1998 8:00am Secretary of State

	MENT # 71287 ERLAND DAY CENTER, INC						
Principal Place of Business Mailing Address						OLDER BIBLIO	IIEIL DIDII FODI
348 S KEECH STREET DAYTONA BEACH FL 32114		348 S KEECH STREET DAYTONA BEACH FL 32114		3. Date Incorporated or Qualified  06/05/1967  4. FEI Number		antial Fav	
					59-1172788	1	pptied For ot Applicable
2. Principal Place of Business 2a. Mailing Addre					5. Certificate of Status Desired		Additional
21	26 Suite, Apt. #, etc.				_		equired
Suite, Apt. #, etc. Suite, Apt. #			etc.		6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> Added t	
City & State		City & State		7. Is this nonprofit corporation a homeowr			
23		28		☐ Yes ☐ No			
Zip	Country Zip		Count	У	8. This corporation owes or has paid the current year Intangible		
24	25] 9. Name and Address of Currer	29	30		Personal Property Tax due June 30.  10. Name and Address of New Registers		No
	a. Harne and Address of Currer	it nogistered Agent	8-	1 Name	10, Italie and Address of Item Hegistere	n whou	
DIXON,	FVA M					<del> </del>	
114 ALEATHA DR.			8:	Z Street Add	dress (P.O. Box Number Is Not Acceptable)		
DAYTONA BEACH FL 32014			8:	3			
			84	City	<u>-</u>	. 85 Zip	Code
				]	F		
office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was ations of, Section 617.0503, F	authorized t lorida Statute	by the corpora es.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	or changing to opointment as	registered
			TE: Registered A	gent algnature requ	uired when reinstating) DATE	NO DISEOTO	
12. TITLE	PD OFFICERS AN	DELETE			ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
NAME	DIXON, EVA MAE		1.1 TITLE 1.2 NAME				
STREET ADDRESS	114 ALEATHA DR.			T ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH FL		1.4 C/TY-	ST-ZIP			
TITLE	VPD DELETE		2.1 TITLE			Change	Addition
NAME	HUGGINS, WILLIE MAE		2.2 NAME	·			
STREET ADDRESS	1134 GRAHAM AVE. HOLLY HILL FL		1	T ADDRESS			
CITY-ST-ZIP TITLE	SD DELETE		2. 4 CITY			☐ Change	Addition
NAME	ADAMS, VONCELE LOUISE		3.2 NAME			L Olivingo	
STREET ADDRESS	755 ELLEN STREET			T ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH FL		3.4. CITY-				
TITLE	DT	☐ DELETE	4.1 TITLE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Chánge	☐ Addition
NAME	FIELDS, MILDRED		.4. 2 NAM	j			
STREET ADDRESS	800 MAGNOLIA AVENUE			T ADDRESS			
CITY-ST-ZIP TITLE	DAYTONA BEACH FL	DELETE	4.4 CITY- 5.1 TITLE			Change	☐ Addition
NAME	MILLER, MESHELLE	had been the	5.2 NAME			Fire Audition	
STREET ADDRESS	848 SCHOOL STREET			T ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH FL		5.4 CITY-		_		
TITLE	DELETE		6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			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 attactment with an address.

3/4/00