FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 721217

1. Corporation Name

PALM GARDENS CHILDREN'S HOME, INC.

Principal Place of Business
4796 42ND ST.
VERO BEACH FL 32967

2. Principal Place of Business

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Mailing Address

4796 42ND ST.

VERO BEACH FL 32967

2a. Mailing Address

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FILED Apr 15, 1999 8:00 am § Secretary of State

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3. Date Incorporated or Qualifed 06/23/1971

Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. FEI Number	Ap	plied For	
22		27		59-1469955	. No	t Applicable		
City & State	ate City & State				5. Certificate of Status Desired	**************************************		
23} Zip	Country Zip		Country		6. Election Campaign Financing	\$5.00	May Re	
24	25 29 30		¬ '		Trust Fund Contribution	Added to	7 1	
24	9. Name and Address of Current Registered Agent				10. Name and Address of New Regist	tered Agent		
	- Halle and Addices of Callette	cogioto car (gove	81	Name				
MASSE, EDGAR J				Street Addres	ss (P.O. Box Number is Not Acceptable)	<u> </u>		
4796 42ND ST.								
VERO BEACH FL 32967								
TERC DE			84	011		85 Zip C	odo -	
March Control				City		FL T	- 1	
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) OATE								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12	
TITLE	P	☐ DELETE	1,1 TITLE		•	☐ Change	☐ Addition	
NAME	MASSE, SHAWN 12		1.2 NAME					
STREET ADDRESS	ACCO ACTIVATE			ADDRESS			- 1	
CITY-ST-ZIP	VERO BEACH FL 32967		1.4 CITY-ST	.7IP				
TITLE			2.1 TITLE			☐ Change	☐ Addition	
NAME I	VANDERWALT, DESIREE		2.2 NAME					
STREET ADDRESS	1228 24TH ST.		2.3 STREET	ADDRESS				
	VERO BEACH FL 32960		2.4 CITY-S					
CITY-ST-ZIP TITLE	D	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition	
NAME	MASSE, ED		3.2 NAME	~ -	the state of the s	The second second second second		
	4796 42ND ST.	•	3.3 STREET	AUDOEGG	,			
STREET ADDRESS	VERO BEACH FL 32967	•						
CITY-ST-ZIP	D	☐ DELETE	3.4. CITY-ST	-ZIP		☐ Change	Addition	
TITLE	_						_	
NAME	MASSE, HONOR		4. 2 NAME	*******	•	•		
STREET ADDRESS	4258 48TH AVE.		4.3 STREET					
CITY-ST-ZIP	VERO BEACH FL 32967		4.4 CITY-ST	-ZIP		☐ Change	Addition	
TITLE	D	☐ DELETE	5.1 TITLE 5.2 NAME		·	□ ouendo		
NAME	KAZEN, SHANNON						.	
STREET ADDRESS	2830 LAUREL DR.	•	5.3 STREET					
CITY-ST-ZIP	VERO BEACH FL 32960		5.4 CITY-ST 6.1 TITLE	·ZIP		Chanca	Addition	
TITLE		ST □ DELETE 6.1			-	Change	☐ Addition	
NAME	CULVER, LINDA		6.2 NAME				.	
STREET ADDRESS	3405 2ND PL		6.3 STREET	ADDRESS	•		ŀ	
CITY-ST-ZIP	VERO BEACH FL		6.4 CITY-ST					
		this filing does not qualify for th	e evemnti	on stated in Se	ection 119 07(3)(i), Florida Statutes, I furth	er certify that the is	nformation	

Interesty density that the information supplied with this filling does not quality for the exemption stated in Section 1.19.07(3)(i), Florida Statutes. I former certary that it am 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.

SIGNATURE: