## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION** ANNUAL REPORT

1997



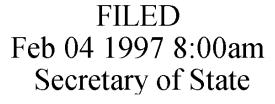
FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #
1. Corporation Name

(5)



CRIMINAL AND JUVENILE JUSTICE INTERNATIONAL, INC							
Principal Place of Business		Mailing Address	Mailing Address		I IRANIT ABUND HINI MINIT BRITE PEND	I ILDƏ BIBIL <del>Di</del> bər bibil bibil bi	HOLL BERKE LOOP!
381 SOUTH OWASSO BLVD.  ROSEVILLE MN 55113  381 SOUTH OWASSO BLVD ROSEVILLE MN 55113-2119 US							
					3. Date incorporated or Qualified 10/14/1975	3a. Date of Last Re 02/26/19	96
2. Principal Place of Business 2a. Mailing Address					4. FEI Number 51-0187430	<del></del>	plied For
26       26					31010140	60.75	t Applicable
22					5. Certificate of Status Desired	Fee Re	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00		
Zip	Country	Zip	Countr	y	8. This corporation has liability for		
24	25	29	30			Yes No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
			81	Name			}
SCHEMBERA, JEFF 676 NAUTILUS COURT			82	Street Ad	dress (P.O. Box Number is Not Acceptal	ble)	
UNIT 7N			63				
FT. WALTON BEACH FL 32548			84	City		85 Zip (	Code
				1 - 7	44.	FL [ ]	
	to the provisions of Sections of 7.0502 egistered agent, or both, in the State of m familiar with, and accept the obliga	of Florida Status of Florida Status of Florida Status of Section 617.0503, F	authorized b lorida Statute	y the corpor is.	rporation submits this statement for the pation's board of directors. I hereby acce	pt the appointment as	registered
SIGNATURE ,	Signature, typed or printed name of registered agen	and title if applicable. (NO	TE: Registered Ag	ent signature req	ulred when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI		
TITLE	P DELETE		1.1 TITLE			☐ Change	Addition
NAME	ROWAN, JOSEPH R.		1.2 NAME				
STREET ADDRESS	381 SOUTH OWASSO BLVD.			T ADORESS			
CITY-ST-ZIP	ROSEVILLE MN	[ ] DELETE	1.4 CITY-	ST-ZIP		Change	Addition
TITLE			2.1 TITLE	i		L_1 Change	L. Accilion
NAME	MAHONEY, MICHAEL J. 59 E VAN BUREN SUITE 1600	1	2.2 NAME	- 1			
STREET ADDRESS	CHICAGO IL	,		T ADDRESS			
CITY-ST-ZIP TITLE	CD CD	DELETE	2. 4 CITY 3.1 TITLE	-31-11		Change	Addition
NAME	COSTELLO, HOWARD J.	had pour to	3.2 NAME			Land Williams	
STREET ADDRESS	1325 MCKISICK RD LANE NO			T ADDRESS			}
CITY - ST - ZIP	STILLWATER MN		3.4. DITY-				
TITLE	D	DELETE	4.1 TITLE	-		☐ Change	Addition
NAME	POWERS, SANGER B.		4. 2 NAMS	.			
STREET ADDRESS	3300 VISTA ROAD		4.3 STREE	T ADDRESS			ļ
CITY-ST-ZIP	GREEN BAY WI		4.4 CITY-	ST-ZIP			
TITLE	VCD DELETE		5.1 TITLE			☐ Change	Addition
NAME	KEHÖE, CHARLES J.		5.2 NAME	İ			
STREET ADDRESS	11805 HEATHMERE CRESCEI	NT .	5.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIDLOTHIAN VA	·	5.4 CITY -	ST-ZIP			
TITLE	STD	☐ DELETE	6.1 TITLE			Change	Addition
NAME	SCHEMBERA, JEFF		6.2 NAME				j
STREET ADDRESS	676 NAUTILUS CT. UNIT 7M		6.3 STREE	T ADDRESS		•	[
CITY-ST-ZIP	FT. WALTON BCH FL		6.4 CITY-	ST-ZIP			

14. I do 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: Joseph R. Rowan, President/CROIC SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR

R. Rowan 1/23/97

(612)481-9644

Daytime Phone # 0076270