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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 734061

1. Corporation Name

CRIMINAL AND JUVENILE JUSTICE INTERNATIONAL, INC

Principal Place of Business

381 SOUTH OWASSO BLVD.
ROSEVILLE MN 55113

Mailing Address

381 SOUTH OWASSO BLVD
ROSEVILLE MN 55113
US

FILED
Mar 05, 1999 8:00 am
Secretary of State

03-05-1999 90110 040 ****61.25

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2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

10/14/1975

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

51-0187430

Applied For
Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

24 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHEMBERA, JEFF
1728 BOLTON VILLAGE LANE
NICEVILLE FL 32578

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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME ROWAN, JOSEPH R.
STREET ADDRESS 381 SOUTH OWASSO BLVD.
CITY-ST-ZIP ROSEVILLE MN

1.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME MAHONEY, MICHAEL J.
STREET ADDRESS 59 E VAN BUREN SUITE 1600
CITY-ST-ZIP CHICAGO IL

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE CD ☐ DELETE

NAME COSTELLO, HOWARD J.
STREET ADDRESS 1325 MCKISICK RD LANE NO
CITY-ST-ZIP STILLWATER MN

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME POWERS, SANGER B.
STREET ADDRESS 3300 VISTA ROAD
CITY-ST-ZIP GREEN BAY WI

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE VCD ☐ DELETE

NAME KEHOE, CHARLES J.
STREET ADDRESS 11805 HEATHMERE CRESCENT
CITY-ST-ZIP MIDLOTHIAN VA

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE STD ☐ DELETE

NAME SCHEMBERA, JEFF
STREET ADDRESS 676 NAUTILUS CT. UNIT 7M
CITY-ST-ZIP FT. WALTON BCH FL

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STD SCHEMBERA, JEFF
1728 BOLTON VILLAGE LANE
NICEVILLE, FL 32578 (change)

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 attachment with an address, with all other like empowered.

SIGNATURE:

Joseph R. Powers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 18, 1999

Date

651.481.9644

Daytime Phone #

CR2E037 (11/98)