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Feb 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 735154 (7)

1. Corporation Name

PARENTS WITHOUT PARTNERS, CHAPTER NUMBER 186, IN CORPORATED



Principal Place of Business

Mailing Address

P.O. BOX 13541
ST. PETERSBURG FL 33733

P.O. BOX 13541
ST. PETERSBURG FL 33733-3541

3. Date Incorporated or Qualified
03/04/1976

3a. Date of Last Report
12/23/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

22 City & State

27 City & State

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUNT, MARIE
2525-69 AVENUE S.
ST PETERSBURG FL 33712

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 HUNT, MARIE
STREET ADDRESS 2525-69 AVENUE S.
CITY-ST-ZIP ST PETERSBURG FL 33712

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE VPMO DELETE
NAME OVERBY, LINDA
STREET ADDRESS 14799-55 WAY NORTH
CITY-ST-ZIP CLEARWATER FL 34620

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE S DELETE
NAME BROOKS, DIANE
STREET ADDRESS 200-72 AVENUE N.
CITY-ST-ZIP ST. PETERSBURG FL 33702

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE SD DELETE
NAME WYATT, DEBRA L
STREET ADDRESS 7372-81ST TERRACE
CITY-ST-ZIP PINELLAS PARK FL 34665

41 TITLE Change Addition
42 NAME WYATT, DEBORAH K.
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE PD DELETE
NAME LUCAS, TERRI
STREET ADDRESS 3645-39TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33714

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 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: *Marie Hunt* REQUIRED

2/17/97

(813) 867-4495

CR2E037 (9/96)