FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

738692

(3)

JUNIOR'S CHARITABLE FUND, INC.

JUNIOR'	S CHARITABLE FUND, IN	J.					
Principal Place o	of Business	Mailing Address	-		i villit id bad biter varia	Jille diffet deatt mitet mis	1(1 \$1\$11 \$1811 (441
P.O. BOX 6114 HOLLYWOOD F	£ 33081	P.O. BOX 6114 HOLLYWOOD FL 33081					
					3. Date Incorporated or Qualified 04/18/1977	3a. Date of La 03/31/	1995
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number	-	Applied For Not Applicable
		26			59-1766058	\$8	75 Additional
Suite, Apt. #	, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	F	ee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be
~	Country	28 Zip	Countr	~	This corporation has liability for	intangible tax ande	r s. 199.032,
Zip	Country 25	29	30	•	Florida Statutes	∐ Yes M∠No	
L	9. Name and Address of Curre				10. Name and Address of New I	Registered Agent	
401 N. R/ HOLLYWO	Jeannette Ainbow dr. Ood FL 33021		8	3 (ib)	Morma Benson idress (P.O. Box Number is Not Accepta 1831	1 - 85	Zin Code 33021 its registered office
or register familiar wit	th, and accept the obligations of, Se	ction 617.0503, Florida Statute	es.	Jarma	^	2-7-96 DATE	CTORS IN 12
12. TITLE -	PD	DELETE	1.1 TiTL	E		Char	nge 🔲 Addition
IAME &	CARTER, JEANNETTE	_	1.2 NAN	16			
STREET ADDRESS	401 N. RAINBOW DR.		13 STR	EET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33021		1.4 CITs	r - ST - ZIP			- Addition
TITLE	VD	DELETE	2 1 TITL	.E	TO	Char	nge 🔲 Addition
LAME	HOLLAND, LORRAINE		2 2 NAM	AE]			
STREET ADDRESS	4214 FILMORE STREET			EET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL	Contro	2. 4 CIT	Y - ST - ZIP	PD	TH Cha	nge 🔲 Addition
IITLE	TD	DELETE	3 1 1111 3 2 NAI	ì			
NAME	BENSON, NORMA			REET ADDRESS	7000018 -05/28/9601	- 44」45 (-000012	
STREET ADDRESS	1831 N. 54TH AVE.			TY - ST - ZIP	-05/28/35-10. 		
CITY - ST - ZIP Title	HOLLYWOOD FL S	DELETE	4.1 TiT		**************************************	Cha	ange 🔲 Addition
NAME	MITCHELL, ELIZABETH	_	4 2 NA	JME			
STREET ADDRESS	1801 NORTH 52 AVE		4.3 STE	REET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL		4.4 CIT	ry-St-ZIP			ange Additio
TITLE	TOTAL TOTAL	DELETE	5 1 TIT	LE	VD.	☐ Cha	
NAME			5 2 NA	ME	Honi Parker 2815 Morning Glo Davie, FL 3332	ru Lane	
STREET ADDRESS				REET ADDRESS	Davie Fr. 3223	بالج	
CITY - ST - ZIP		Figure			3332	Cha	ange Additio
TITLE		DELETE	61 Til	!			
NAME			6.2 NA				
STREET ADDRESS			5.4.0	REET ADDRESS			
CITY-ST-ZIP	he and it that the information currell	ed with this filing is voluntarily		TY-ST-ZIP does not qua	L alify for the exemption stated in Section 1 courate and that my signature shall have	19.07(3)(k), Florida (Statutes. I further
certify th	aby certify that the information suppli- lat the information indicated on this a at I am an officer or director of the co- in Block 12 or Block 13 if changed,	emoration or the receiver or tru	ustee empower	uces not qua s true and ac- red to execute	incurate and that my signature shall have this report as required by Chapter 617	. Florida Statutes: at	t as if made und that my name is 3 -8 3 7

SIGNATURE: