FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra'B. Mordiam

FILED

Jul 02 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998

DOCU 1. Corporation	MENT # 74699	98 (4)			
THE CENTER FOR RESPONSIBLE BIRTH CONTROL, INC.					
Principal Plac	ce of Business	Mailing Address		108:11: [001] 015:0 05:10 1010 1010 1010 [010]	HIDAR ORDAK DIDIL BIDIL BIDAL (BA)
1564 DIXIE WAY MELBOURNE FL 32935 MELBOURNE FL 32935			3. Date Incorporated or Qualified		
	- 	werbootust is otada		05/01/1979	
				4. FEI Number	Applied For
2. Principal f	Place of Business	2a. Mailing Address		59-1956923	Not Applicable \$8.75 Additional
21 26		26		5. Certificate of Status Desired	Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
City & State		City & State		Trust Fund Contribution	Added to Fees
23		28		7. Is this nonprofit corporation a homeown	ers association? ☑No
Zip	Country	Zıp	Country	8. This corporation owes or has paid the o	
24	25 9. Name and Address of Curr	29	30	Personal Property Tax due June 30.	Yes Wo
	y, Name and Address of Curr	ent Hegistered Agent	81 Name	10. Name and Address of New Registered	
WHITE THE	ENWADO W ID			J. PATRICK ANDERSO	لاد
WINDLE, EDWARD W., JR. 1584 DIXIE WAY			82 Street Add	ress (P.O. Box Number is Not Acceptable)	V BEND
MELBOURNE FL 32935			83		<u> </u>
			84 City	Suite 505	BE Zin Code
			1 1 1/1	MELBOURNE FI	L 85 Zip Code 3 2 9 0 /
11. Pursuant office or	to the provisions of Sections 617.08 registered agent. A both in the Sta	502 and 617,1508, Florida Stati te of Florida/Such change was	utes, the above-named corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered
agent. I a	am familier with the accept the obli	ortions of Section 3710503, F	lorida-Statutes.	tions does a circulation in the appropriate appropriat	1/08/00
SIGNATURE	Signature, whed or printed name of registered s	ment and tille if prolicable (NC	DTE: Registered Agent signature requi	red when reinstating) DATE	4/2970
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	WINDLE, PATRICIA BAIRD		1.2 NAME		
STREET ADDRESS	1\$64 DIXIE WAY MELBOURNE FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	IDV	₩ DELETË	1.4 CHY-ST-ZIP 2.1 TITLE		Change Addition
NAME	WINDLE, EDWARD W., JR.		2.2 NAME		Onlinge Addition
STREET ADDRESS	1564 DIXIE WAY		2.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		2. 4 CITY-ST-ZIP		
TITLE	D.	☐ DELETE	3.1 TITLE		Change Addition
NAME OTDEET ADDRESS	WINDLE, RONI L 1564 DIXIE WAY		3.2 NAME		
STREET ADDRESS	MELBOURNE FL 32935		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D SA 15 65	/ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME	D SANFORD, 15xy DIVIEWA MELBOURR,	LIEFT M	4. 2 NAME		
STREET ADDRESS	13xy DIVIE WA	4	4.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURIE,	1.32903	4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS CITY-ST-ZIP	· .		5.3 STREET ADDRESS		
TITLE	<u>.</u>	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME	\$		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby of indicated	certify that the information supplied on this annual report or supplied	with this filing does not qualify tal annual report is true and ac	for the exemption stated in curate and that my signature	Section 119.07(3)(i), Florida Statutes, I further o	ertify that the information
officer or Block 12	director of the corporation or the re- or Block 13 if changed or of an att	ceiver or trustee empowered to achment with an address	execute this report as requ	re shall have the same legal effect as if made u pired by Chapter 617, Florida Statutes; and that	my name appears in