

NON-PROFIT
CORPORATION
ANNUAL REPORT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # 754634

1. Corporation Name

THE EXTENDED FAMILY, INC.

Principal Place of Business

Mailing Address

1270 ORANGE CAMP RD SAME
DELAND FL 32724

600009354726
12/04/02--01065--028 **183.75

2. Principal Place of Business

2a. Mailing Address

21 1270 ORANGE CAMP RD

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 DELAND FL

28 City & State

24 Zip 32724 Country USA

29 Zip Country

3. Date Incorporated or Qualified

10/14/1980

4. FEI Number

59-2048863

Applied For

Not Applicab

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

FORD, ANN

1270 ORANGE CAMP RD
DELAND FL 32724

10. Name and Address of New Registered Agent

81 Name

N/A

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

ANN FORD (386) 734 5309 11-18-02

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME DOWNEY, MARIE
STREET ADDRESS 728 ST. ANDREWS CIRCLE
CITY-ST-ZIP NEW SMYRNA BEACH FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
AVIS AKEM LATHAM
1825 BUSINESS PARK BLVD
DAYTONA BEACH FL 32114

TITLE TD
NAME PAUL COLLINS
STREET ADDRESS 2203 RIDGEWOOD AVE
CITY-ST-ZIP DAYTONA BEACH FL 32115

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
DAVID ZEGHARDWITZ
123 W INDIANA AVE
DELAND FL 32720

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DS
NAME STROUD, GLORIA
STREET ADDRESS 32 IROQUOIS TRAIL
CITY-ST-ZIP ORMOND BEACH FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

Marie V Downey

11-18-02

(386) 734 5309