

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSFILED
Apr 30 1997 8:00am
Secretary of State

DOCUMENT # 754912 (4)

1. Corporation Name

JUSTICE FOR SURVIVING VICTIMS, INC.



Principal Place of Business

125 N 46 AVE.
HOLLYWOOD FL 33021

Mailing Address

125 N 46 AVE.
HOLLYWOOD FL 33021-66013. Date Incorporated or Qualified
10/30/19803a. Date of Last Report
04/08/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

28 Zip

29

Country

30

4. FEI Number

59-2056604

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GOTTIEB, BRUCE
125 N 46 AVE.
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

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

TITLE VPD ☐ DELETENAME PRESTON, BOB
STREET ADDRESS 3100 CHERRY CREEK DR S, S104
CITY-ST-ZIP DENVER CO 80209TITLE D ☐ DELETENAME PRESTON, PAT
STREET ADDRESS 3100 CHERRY CREEK DR S, S104
CITY-ST-ZIP DENVER CO 80209TITLE STD ☒ DELETENAME NOVAK, ANNE
STREET ADDRESS 2881 DAVIE BLVD
CITY-ST-ZIP FT. LAUDERDALE FL 33312TITLE PD ☐ DELETENAME NOVAK, GREG
STREET ADDRESS 1817 SW 24TH AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33312TITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Rose Novak
HOLLYWOOD, FL 33312

3-19-97

Date

954-587-7144

Daytime Phone # 0021500

CR2E037 (9/96)