FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 757972

1. Corporation Name

SOUTH BAY-BELLE GLADE TARGET AREA GROUP, INC.

Principal Place of Business

Mailing Address

625 PALM 3EACH ROAD SOUTH BAY FL 33493

625 PALM BEACH ROAD SOUTH BAY FL 33493

FILED Apr 26, 1999 8:00 am § Secretary of State

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		B B B B AB

Principal Place of Business 2a.		2a. Mailing Address	≀a. Mailing Address		Date Incorporated or Qualifed							
21		26		05/11/1981								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4. FEI Number	Apr	lied For					
22		27			65-0151795	Not	Applicable					
City & State		City & State			5. Certificate of Status Desired	\$8.75 A	ditional					
23 28				3. Certificate of Status Desired	Fee Rec	uired						
Zip Country Zip		Countr	<u>у</u> —	6. Election Campaign Financing	\$5.00	/lay Be						
		30		Trust Fund Contribution	Added to	Fees						
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	i Agent						
			8									
SINGLETARY, VERLENCIA				2 Street	Address (P.O. Boy Number is Not Acceptable)							
· ·				1	N.W. 12th St.							
245 SW 7TH AVE SOUTH BAY FL 33493				3 214	9-14-M4T-(T1-13-ps-							
SOUTH D	41 FL 33493		L			100 710						
			8	City S	South Bay Fl	L 85 Zip C						
11 Purcus pt 6	to the provisions of Sections 617 0502	and 617 1508 Florida Statu	tes the abo	ve named	compration submits this statement for the purpose of	of changing its	egistered					
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Stati tes, 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 ar	agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.											
SIGNATUF:E	//	and title if another (NOT	C: Decistored An	ent cionatura	req irred when reinstating) DATE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: I OFFICERS AND DIRECTORS			13.	ork alginatoro	ADDITIONS/CHANGES TO OFFICERS	ND DIRECTOR	S IN 12					
TITLE	C	▼ DELETE	1.1 TITLE			Change	Addition					
	SINGLETARY, VERLENCIA		1.2 NAME	:	Edwards, Lavern							
NAME				ET ADORESS								
STREET ADDRESS 703 OAK CT			1.3 STREET ADDRESS 14 CITY-ST-ZIP 210 S.W. 12th St. South Bay, F1. 33493									
CITY-ST-ZIP	SOUTH BAY FL 33493	★ DELETE	2.1 TITLE		Stuff Bay, FI. 30423	▼ Change	Addition					
TITLE			2.1 HILL		Sinclair, Marcia	•	_					
NAME	LENNON, MARGARET				. 917 S.W. Ave H. ≘							
STREET ADDRESS	2102 HIBISCUS CT			ET ADDRESS	Belle Glade, Fl. 33430							
CITY-ST-ZIP	SOUTH BAY FL 33493	K DELETE	2. 4 CITY			Change	Addition					
TITLE	S	(C) DECEIE	3.1 TITLE	U	McGriff, Janita	22						
NAME	FULLER, LANA		3.2 NAME		120 S.W. 2nd Ave.							
STREET ADDRESS	310 SE 2ND ST			ET ADDRESS	South Pay, Fl. 33493							
CITY-ST-ZIP	SOUTH BAY FL 33493		3.4. CITY			☐ Change	Addition					
TITLE	1	☐ DELETE	4.1 TITLE	_	Harling Appelo	- Cuanga	WENT CHANGED IN					
NAME	HAWKINS, ANGELA		4. 2 NAM		Hawkins, Angela		ì					
STREET ADDRESS	902 JASMIN CT		4.3 STRE	ET ADDRESS			i					
CITY-ST-ZIP	SOUTH BAY FL 33493		4.4 CITY		South Bay, Fl. 33493	FE Change	ET addition					
TITLE	T	▼ DELETE	5.1 TITLE	-	0.17	X Change	Addition					
NAME	JEFFERSON, LENA		5.2 NAME		Saddlers, Margaret							
STREET ADDRESS	501 S SHORE VILLAGE			ET ADDRESS	ATTO HAME THE COL							
CITY-ST-ZIP	CLEWISTON FL 33440		5.4 CITY		Belle Glade, Fl. 33430							
TITLE	Τ	K DELETE	6.1 TITLE	T	0. 1. 1. 1.	🔀 Change	Addition					
NAME .	CARTESIA JONES		6.2 NAMI	=	Singletary, Verlencia							
STREET ADDRESS	524 SW AVE. D, #3		6.3 STRE	ET ADDRESS								
CITY-ST-ZIP	BELLE GLADE FL 33430		6.4 CITY		South Bay, F1. 33493							
44	- and the second second second second second second	, this files does not suglify f	or the every	otion state	ed in Section 119 07 (3\(i)) Florida Statutes, I further (ertify that the in	formation					

Indicated on this annual report or supplied with his litting 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 suppliemental annual report is true and securate 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 any attachment with an address, with all other like empowered.

SIGNATURE: