

NONPROFIT
CORPORATION
ANNUAL REPORTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS**FILED**
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90173 019 ****61.25

DOCUMENT # 757972 ✓

1. Corporation Name

SOUTH BAY-BELLE GLADE TARGET AREA GROUP, INC.

Principal Place of Business

625 PALM BEACH ROAD
SOUTH BAY FL 33493

Mailing Address

625 PALM BEACH ROAD
SOUTH BAY FL 33493

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

25 Suite, Apt. #, etc.

3. Date Incorporated or Qualified

05/11/1981

22 City & State

27 City & State

4. FEI Number
65-0151795Applied For
Not Applicable

23 Zip Country

28 Zip Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

24 Zip Country

29 Zip Country

6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

Palevoda, Carolina

82 Street Address (P.O. Box Number is Not Acceptable)

715 M.H.P. #02

83

84 City

Belle Glade

FL

85 Zip Code

33430

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

3/24/00

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	C	☒ DELETE
NAME	Edwards, Lavern	
STREET ADDRESS	210 S.W. 12th St.	
CITY-ST-ZIP	South Bay, FL 33493	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	Palevoda, Carolina
1.3 STREET ADDRESS	715 M.H.P. #2
1.4 CITY-ST-ZIP	Belle Glade, FL 33430

TITLE	V	☒ DELETE
NAME	Sinclair, Marcia	
STREET ADDRESS	917 S.W. Ave H.	
CITY-ST-ZIP	Belle Glade, FL 33430	

2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	McGriff, Juanita
2.3 STREET ADDRESS	120 S.W. 2nd Ave
2.4 CITY-ST-ZIP	South Bay, FL 33493

TITLE	S	☒ DELETE
NAME	McGriff, Juanita	
STREET ADDRESS	120 S.W. 2nd Ave	
CITY-ST-ZIP	South Bay, FL 33493	

3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	Becraft, Donna
3.3 STREET ADDRESS	345 U.S. Hwy 27
3.4 CITY-ST-ZIP	South Bay, FL 33493

TITLE	T	☒ DELETE
NAME	Hawkins, Angela	
STREET ADDRESS	902 Jasmine Ct.	
CITY-ST-ZIP	South Bay, FL 33493	

4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	Scarlett, Vanessa
4.3 STREET ADDRESS	949 S.W. Ave J.
4.4 CITY-ST-ZIP	Belle Glade, FL 33493

TITLE	T	☒ DELETE
NAME	Saddler, Margaret	
STREET ADDRESS	2440 N.W. 14th St.	
CITY-ST-ZIP	Belle Glade, FL 33430	

5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	Gordon, Grace
5.3 STREET ADDRESS	630 S.E. 2nd St.
5.4 CITY-ST-ZIP	Belle Glade, FL 33430

TITLE	T	☒ DELETE
NAME	Singletary, Verlenia	
STREET ADDRESS	245 S.W. 7th Ave	
CITY-ST-ZIP	South Bay, FL 33493	

6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	Noland, Tammy
6.3 STREET ADDRESS	1641 N.W. Ave D #2
6.4 CITY-ST-ZIP	Belle Glade, FL 33430

14. 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-00