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May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760074 (5)
1. Corporation Name
PARENTS WITHOUT PARTNERS NORTH BROWARD CHARTER N O. 1129, INC.



Principal Place of Business: 7640 SOUTHGATE BLVD BAY 1 NORTH LAUDERDALE FL 33068 US
Mailing Address: P.O. BOX 93-6097 MARGATE FL 33093 US

3. Date Incorporated or Qualified: 09/17/1981
4. FEI Number: 59-1225577
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for Suite, Apt. #, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: BERNIER, RUTH, 5071 W OAKLAND PARK BLVD G311, LAUDERDALE LAKES FL 33313

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, State (FL), and 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED
PD	BERNIER, RUTH	5071 W OAKLAND PARK BLVD G311	LAUDERDALE LAKES FL	<input type="checkbox"/>
VD	QUINNAN, MARIA	6549 BLVD OF CHAMPIONS	NORTH LAUDERDALE FL	<input checked="" type="checkbox"/>
SD	HENDRICKS, MARLENE	7525 NW 61ST TERR #1201	PARKLAND FL	<input checked="" type="checkbox"/>
TD	CIBA, JOAN	6984 NW 5TH CT	MARGATE FL	<input checked="" type="checkbox"/>
	DIRECTOR OF MEMBERSHIP			<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED	Change	Addition
VP	Boone, TYRONE	5071 W OAKLAND PARK BLVD G 311	LAUDERDALE LAKES, FL 33313	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SECRETARY	HILDA DEBAN	741 BANKS ROAD	MARGATE FL 33063	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TREASURER	BEATRICE ZALEWITZ	8060 NW 41ST COURT	SUNRISE FL 33351	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DIRECTOR OF MEMBERSHIP	CAROLYN KUSHNER	5714 NW 73RD AVE	TAMARAC FL 33321	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DIRECTOR OF OPERATIONS	FRED COCO	4806 main land drive	TAMARAC FL 33319	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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.

SIGNATURE: Ruth Bernier Ruth Bernier Date: March 4, 1998 Daytime Phone: 957-746-6866

CR2E037 (10/97)