HUNTER, PATTILLO, MARCHMAN, MAPP & DAVIS
ATTORNEYS AND COUNSELLORS AT LAW
243 W PARK AVENUE
WINTER PARK, FLORIDA 32790

DANIEL M. HUNTER
JOHN T. PATTILLO
KENNETH R. MARCHMAN
JAMES D. MAPP
WILLIAM H. DAVIS

POST OFFICE BOX 340
WINTER PARK, FLORIDA 32790
TELEPHONE 647-6800

February 16, 1982

500222932575

Mr. Dick Hollahan
P. O. Box 4087
Tallahassee, Florida 32303

Re: Incorporation of
Florida Association of Christian
Child-Caring Agencies, Inc.
a Florida Non-profit Corporation

FILED
FEB 22 9 35 AM '82
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Dick:

Please find enclosed original and one executed copy of the Articles of Incorporation of the above referenced corporation. I have additionally enclosed my office check in the amount of $38.00 to cover the cost of the filing fee, certificate of resident agent and a certified copy of the Charter. I would appreciate your taking care of filing of the same.

Your cooperation is appreciated.

Sincerely,

John T. Pattillo

JTP:vmg
Enclosures

Name Availability	2-22-82
Document Examiner	
Updater	02-22
Update Verifier	2/23
Acknowledgement	2/24
W. P. Verifier	GW 2/24/82

NON-PROFIT CORP.

FILING	$30
C. COPY	5
R. AGENT	3
TOTAL	$38
BALANCE DUE $	
REFUND $	

008 0646 2/25/82 30.00
005 0646 2/25/82
008 0646 2/25/82

FILED

FEB 22 9 35 AM '82

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

OF

762042

FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC.
a corporation, not for profit, under the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be "FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC.," which shall be located in Orlando, Orange County, Florida, and such other places as the Board of Directors may from time to time direct.

ARTICLE II

The general purposes and objectives of this corporation shall be to function as a non-stock, non-profit organization in which the members, officers and directors have no proprietary interest in assets or income for the purpose and objective of establishing and operating a child-caring accreditation association and for the promotion, advancement and development of Christian Child-Caring Agencies and/or other related activities incidental thereto and not inconsistent therewith. It is the intention of the incorporators and members that this corporation shall be guided in its objectives, operation, management, programs and pursuits by Christian spiritual values as shall be more particularly reflected and set forth in the Bylaws and henceforth determined and established by the Board of Directors and as are consistent and not in conflict with the following Statement of Faith of this Corporation: We believe that whatever the Bible says is true - which means that we believe in the inspiration of both the Old and New Testaments. We believe that man was created by the direct act of God and in the image of God. We believe that Adam and Eve in yielding to the temptation of Satan became fallen

creatures. We believe in the Incarnation, the Virgin Birth, and the Deity of our Lord and Savior Jesus Christ. We believe in His vicarious and substitutional Atonement for the sins of mankind by the shedding of His blood on the Cross. We believe in the resurrection of His body from the tomb, His ascension to Heaven, and that He is now our Advocate. We believe that He is personally coming again. We believe in His power to save men from sin. We believe in the necessity of the New Birth, and that this New Birth is through the regeneration by the Holy Spirit. We believe that salvation is by grace through faith in the atoning blood of our Lord and Savior Jesus Christ. We believe that this creed is a sufficient basis for Christian fellowship and that all born again men and women who sincerely accept this creed can, and should, live together in peace, and that it is their Christian duty to promote harmony among the members of the Body of Christ, and also to work together to get the Gospel to as many people as possible in the shortest time possible.

ARTICLE III

The membership of this corporation shall consist of any and all Christian Child-Caring Agencies organized as Florida Non-profit Corporations who sympathize with, and in good faith, wish to participate in the purposes and objects herein expressed, who by and through its Board of Directors or equivalent and its staff can and do ascribe in writing to the above mentioned Statement of Faith, and who agree to and do abide by rules, regulations and minimum standards as they may henceforth be established by the Board of Directors of this Corporation. A Member may be admitted to membership by the invitation of or application to and the approval of the Board of Directors of this corporation in the manner to be set forth in said Bylaws.

ARTICLE IV

This corporation shall have perpetual existence.

ARTICLE V

The names and residences of the subscribers hereto are as follows:

W. M. Sanderlin
1330 Webster Avenue
Orlando, Florida

Robert L. Butterfield
2043 Siesta Lane
Orlando, Florida

John T. Pattillo
146 Virginia Drive
Winter Park, Florida

ARTICLE VI

The officers of the corporation shall be a President, such number of Vice-Presidents as may be provided in the Bylaws, a Secretary, a Treasurer and such other officers as may be provided in the Bylaws. The officers shall be elected at the annual meeting of the Board of Directors or as provided in the Bylaws. The names of those persons who are to serve until the first election of said officers as provided in the Bylaws are:

W. M. Sanderlin, President
Robert L. Butterfield, Vice-President
John T. Pattillo, Secretary and Treasurer

ARTICLE VII

The business affairs of this corporation shall be managed by a Board of Directors. This corporation initially shall have three (3) directors. The number of directors may be increased or decreased from time to time by the Bylaws, but shall never be less than three (3). Members of the Board of Directors shall be elected and hold office in accordance with the

Bylaws. The names and addresses of the persons who are to serve until the first election of said Directors are:

W. M. Sanderlin
1330 Webster Avenue
Orlando, Florida

John T. Pattillo
146 Virginia Drive
Winter Park, Florida

Robert L. Butterfield
2043 Siesta Lane
Orlando, Florida

ARTICLE VIII

The Board of Directors of this Corporation may provide such Bylaws for the conduct of its business and the carrying out of its purposes as they may deem necessary initially and from time to time thereafter. Upon proper notice as required in said Bylaws, the Bylaws may be amended, altered or rescinded by a two-thirds majority vote of those members of the Board of Directors present at any regular meeting at which a quorum is present or at any special meeting at which a quorum is present and which has been called for that purpose.

ARTICLE IX

The Articles of Incorporation may be amended at a special meeting of the membership called for that purpose and at which a quorum is present, by a two-thirds (2/3) vote of those members present at said meeting. Amendments may also be made by a two-thirds (2/3) vote of those members at a regular meeting of the membership at which a quorum is present, upon notice given as required by the Bylaws of the intention of anyone to submit such amendments. Proposals for any amendments may be submitted by any member in accordance with the procedure to be set forth in the Bylaws.

ARTICLE X

Every Director and every officer of the corporation shall be indemnified by the Corporation against all expenses and

liabilities, including counsel fees, reasonably incurred by or imposed upon him or her in connection with any proceedings or any settlement of any proceeding to which he or she may be a party or in which he or she may become involved by reason of his or her being or having been a Director or officer of the Corporation, whether or not he or she is a Director or Officer at the time such expenses are incurred, except in such cases wherein the Director or officer is adjudged guilty of willful misfeasance or malfeasance in the performance of his or her duties; provided, that in the event of a settlement, the indemnification herein shall apply only when the Board of Directors approves such settlement and reimbursement as being for the best interests of the Corporation. The aforegoing right of indemnification shall be in addition to and not exclusive of all other rights to which such Director or officer may be entitled.

ARTICLE XI

This corporation may be dissolved with the consent given in writing and signed by two-thirds (2/3) of the membership. Upon the dissolution, voluntary or otherwise, of the Corporation, the assets of the Corporation shall be dedicated to an appropriate entity for purposes similar to those for which this Corporation was created. In the event that such dedication is refused acceptance, such assets may be granted, conveyed and assigned to any non-profit corporation, association, trust or other organization devoted to such similar purposes.

ARTICLE XII

The resident agent of the corporation to accept service of process in the state and who shall serve until replaced by the Board of Directors of the corporation shall be JOHN T. PATTILLO,

whose street address is 146 Virginia Drive, Winter Park, Florida 32789.

IN WITNESS WHEREOF, the undersigned incorporators hereby subscribe their names to the foregoing Articles this 16 day of February, 1982.

(SEAL)

(SEAL)

(SEAL)

ACCEPTANCE OF DESIGNATION AS RESIDENT AGENT

The undersigned hereby accepts his designation as Resident Agent of the above named Corporation as contained in these Articles of Incorporation and agrees to provide the services as required or as may be required under the provisions, laws and statutes of the State of Florida

DATED: This 16 day of February, 1982.

JOHN T. PATTILLO

STATE OF FLORIDA

COUNTY OF ORANGE

Before the undersigned personally appeared
W. M. SANDERLIN

well known to me to be the subscribers named in and who executed the foregoing Articles of Incorporation, and acknowledged before me that executed the same as incorporators thereof for the purposes therein expressed.

WITNESS my hand and official seal at Orlando Orange County, Florida, this 16 day of February, 1982.

Barbara W. Stewart
NOTARY PUBLIC
Notary Public, State of Florida at Large
My Commission Expires Dec. 2, 1983
Bonded by American Fire & Casualty Company

STATE OF FLORIDA

COUNTY OF ORANGE

Before the undersigned personally appeared
JOHN T. PATILLO

well known to me to be the subscriber named in and who executed the foregoing Articles of Incorporation, and acknowledged before me that executed the same as incorporator thereof for the purposes therein expressed.

WITNESS my hand and official seal at Orlando Orange County, Florida, this 16th day of February, 1982.

Barbara W. Stewart
NOTARY PUBLIC
Notary Public, State of Florida at Large
My Commission Expires Dec. 2, 1983
Bonded by American Fire & Casualty Company

STATE OF FLORIDA

COUNTY OF ORANGE

Before the undersigned personally appeared
ROBERT L. BUTTERFIELD

well known to me to be the subscriber named in and who executed the foregoing Articles of Incorporation, and acknowledged before me that executed the same as incorporator thereof for the purposes therein expressed.

WITNESS my hand and official seal at Orlando Orange County, Florida, this 16th day of February, 1982.

Barbara W. Stewart
NOTARY PUBLIC
Notary Public, State of Florida at Large
My Commission Expires Dec. 2, 1983
Bonded by American Fire & Casualty Company

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION ANNUAL REPORT 1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE
APPROVED AND FILED
Aug 25 10 05 AM

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

FLORIDA DEPT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

1. Name and Address of Corporation Principal Office.

762042
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CAR
ING AGENCIES, INC.
146 VIRGINIA DRIVE
WINTER PARK, FL 32789

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 02/22/1982

4. Federal Employer Identification Number (FEIN): N/A

5. Date of Last Report

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1982

Names of Officers and Director's	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SANDERLIN (W. M.)	P/D	1330 WEBSTER AVENUE	ORLANDO, FL
BUTTERFIELD (ROBERT L.)	V/D	2043 SIESTA LANE	ORLANDO, FL
PATTILLO (JOHN T.)	S/T/D	146 VIRGINIA DRIVE	WINTER PARK, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

PATTILLO (JOHN T.)
146 VIRGINIA DRIVE
WINTER PARK, FL 32789

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath

Signature	Date
	August 17, 1983
Typed Name of Signing Officer	**Title**
John T. Pattillo	Secretary/Treasurer
Telephone Number	
(305) 647-6900	

760042

HUNTER, PATTILLO, MARCHMAN, MAPP & DAVIS
ATTORNEYS AND COUNSELLORS AT LAW
243 W PARK AVENUE
WINTER PARK, FLORIDA 32790

DANIEL M. HUNTER
JOHN T. PATTILLO
KENNETH R. MARCHMAN
JAMES D. MAPP
WILLIAM H. DAVIS
JOHN SANDERS

POST OFFICE BOX 340
WINTER PARK, FLORIDA 32790
TELEPHONE 647-6500
(305)

September 19, 1983

005 6731 10/12/83 15.0
ds54ff 10/13/83 30.0
005 6731 10/13/83 15.0
005 6731 10/13/83 15.0

Corporate Records Bureau
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32301

Re: Amendment to Charter of FLORIDA ASSOCIATION OF CHRISTIAN CHILD CARING AGENCIES, INC.

Gentlemen:

Enclosed please find the original and one (1) copy of the Amendment to the above mentioned Articles properly signed and acknowledged.

Enclosed you will also find our check payable to your order in the amount of $30.00 for both the filing of the amendment and the certification and return to me of a certified copy of that amendment. I am also enclosing a self-addressed stamped envelope for your convenience.

FILED
83 OCT 12 AM 10:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sincerely,

John T. Pattillo

JTP:vmg
Enclosures
cc: Robert L. Butterfield
President, FACCCA

C. TAX
FILING 15.00
R. AGENT FEE 15
C. COPY 15.00
TOTAL 30.00
N. BANK
BALANCE DUE
REFUND

cc $5.00
cp 10.00

Name Availability	10-4-83
Document Examiner	dp / 45
Updater	dp
Updater Verifier	MHK OCT
Acknowledgment	dp
Typist Verifier	MHK OCT 12 1983

Mr. Pattillo's Sec. GAVE AUTHORIZATION BY PHONE TO CORRECT Add hyphen in name + date of adoption 10-12-1983 10-6-83

DOC. EXAM. dp

AMENDMENT OF ARTICLES OF INCORPORATION

OF

FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC., a Corporation, not for profit, under the laws of the State of Florida.

1. Article II of the Articles of Incorporation of FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC., a Florida Corporation, is hereby amended by adding at the end thereof a new paragraph reading as follows:

"This Corporation is also organized and operated exclusively for religious and charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1954."

FILED

2. Article XI of the Articles of Incorporation of FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC., a Florida Corporation, is hereby amended in its entirety to read as follows:

"ARTICLE XI.

This Corporation may be dissolved with the consent given in writing and signed by two-thirds (2/3) of its membership. In the event of dissolution, voluntary or otherwise, of the corporation, all assets, real and personal, shall be distributed to such organizations as are qualified as tax exempt under Section 501(c)(3) of the Internal Revenue Code or the corresponding provisions of a future United States Internal Revenue Law." These amendments were adopted by the Board of Directors on September 21, 1983.

IN WITNESS WHEREOF, the undersigned President and Secretary of this Corporation, have executed these Articles of Amendment, this 28 day of September, 1983.

Robert L. Butterfield
ROBERT L. BUTTERFIELD, as President

John T. Pattillo
JOHN T. PATTILLO, as Secretary

STATE OF FLORIDA

COUNTY OF ORANGE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared ROBERT L. BUTTERFIELD AND JOHN T. PATTILLO, well known to me to be the President and Secretary respectively of the corporation named in the foregoing instrument, and that they severally acknowledged executing the same, freely and voluntarily under authority duly vested in them by said corporation and that the seal affixed thereto is the true corporate seal of said corporation.

WITNESS my hand and official seal in the County and State last aforesaid this 28 day of September, 1983.

Alexander Kennedy Edwards
NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

My Commission Expires:

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JUNE 10, 1984
BONDED THROUGH HUGINS-ASHTON INC.

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT 1984

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
JUN 27 10 59 AM 19

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

742042
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC.
146 VIRGINIA DRIVE
WINTER PARK, FL 32789

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporate Office. P.O. Box Number Alone is NOT Sufficient
Street Address
P.O. Box No.
City
State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 02/22/1982

4. Federal Employer Identification Number (FEIN): 59-2249280 ✓

5. Date of Last Report: 08/[illegible]

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~SANDERLIN (W. M.)~~	~~P/D~~	~~1330 WEBSTER AVENUE~~	~~ORLANDO, FL~~
~~BUTTERFIELD (ROBERT L.)~~	~~V/D~~	~~2043 SIESTA LANE~~	~~ORLANDO, FL~~
~~PATTILLO (JOHN T.)~~	~~S/T/D~~	~~146 VIRGINIA DRIVE~~	~~WINTER PARK, FL~~
Lynd (John W.)	P/D	1499 Edgewood Ranch Rd.	Orlando, FL 3281[illegible]
McGowan (Lindy)	V/D	Mushinski Road ✓	Tampa, FL 33622
Hinkle (James J.)	V/D	SR 505	Roseland, FL 3[illegible]
Donohue (Terrance)	S/T/D	Hwy 15 (Rt. 5 Bx 1194)	Orlando, FL 3281[illegible]
Butterfield (Robert L.)	D	1520 Edgewoater Drive	Orlando, FL 32804
Caldwell (D.P.)	D	2110 W. Cypress St.	Pensacola, FL 3250[illegible]

Registered Agent Information

7. Name and Address of Current Registered Agent

PATTILLO (JOHN T.)
146 VIRGINIA DRIVE
WINTER PARK, FL 32789

8. Name and Address of New Registered Agent
Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Signature: John W. Lynd
Date: March 26, 1984
Typed Name of Signing Officer: John W. Lynd
Title: President
Telephone Number: 305 295-2464

11. Should you desire a certificate of status check the box below and include an additional $5.00 with your payment.
CERTIFICATE OF STATUS DESIRED ☐
$5 Additional fee required for certificates.

BLOCK 6 Continued

NAME OF OFFICERS	TITLE	STREET ADDRESS	CITY & STATE
[illegible]on (Clyde F.)	D	6000 E. Colonial Drive	Orlando, FL 3[illegible]
[illegible]ston (Richard P)	D	Hwy 47 S. Lake City Baptist Temple	Lake City, FL 3[illegible]
[illegible]igh (Jack L.)	D	7771 Mahan Drive	Tallahassee, FL [illegible]
Hollahan (Richard A.)	D	103 N. Maridian Road	Tallahassee, FL [illegible]
Moseley (Joseph)	D	8517 S.E. Coconut Street	Hobe Sound, FL [illegible]
[illegible]owen (William A.)	D	1647 Londonberry Rd.	Jacksonville, FL
[illegible]attillo (John T.)	D	146 Virginia Dr.	Winter Park, FL [illegible]
[illegible]onderlin (Waldron M.)	D	1330 Webster Ave.	Orlando, FL 32802
[illegible]offens (R. Hugh)	D	Sailda Youth Ranch SR 505	Roseland, FL 3295[illegible]
[illegible]tum (James)		6835 Seneca Ave.	Jacksonville, FL [illegible]
Marvel (Doyle E.)	D	Florida's Boys Ranch S. SR 33	Clermont, FL 3271[illegible]
Woodson (Winston C.)	D	1490 S.E. Cove Rd.	Stuart, FL 33494

DEC DATE ON OR AFTER JANUARY 1 BUT NOT AFTER JULY 1 OF FACTYEAR

CORPORATION

ANNUAL REPORT

1985

FILED

[illegible] -8 AM 11:25

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation

762042 0
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CAR
ING AGENCIES, INC.
146 VIRGINIA DRIVE
WINTER PARK, FL 32789

If above address is incorrect in any way, enter the correct address on item 2. Include Zip Code

2 [illegible] 20.0

3 Date Incorporated or Qualified To Do Business in Florida 02/22/1982

4 Federal Employer Identification Number 59-2249280

5 Date of Last Report 06/27/1984

6 Names and Street Addresses of Each Officer and Director as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State	
1	LUND, JOHN	P/D	1499 EDGEWOOD RANCH	ORLANDO, FL	0000
2	MCGOWAN, LINDY	V/D	MUCHINSKI RD	TAMPOA, FL	0000
3	HINKLE, JAMES	V/D	SR 505	ROSELAND, FL	0000
4	DONOHUE, TERR	S/T/D	HWY 15 RT 5 BX 1194	ORLANDO, F L	0000
5	BUTTERFIELD, ROBERT	D	1520 EDGE WATER DR	ORLANDO, FL	0000
6	CALDWELL, D P	D	2110 W CYPRESS ST	PENSACOLA, FL	0000
7	Fuller, Ann	Ex. Sec.	N. Meridian Ave.	Tallahassee, Fla.	

Registered Agent Information

7 Name and Address of Current Registered Agent

PATTILLO (JOHN T.)
146 VIRGINIA DRIVE
WINTER PARK, FL 3789

8 Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9 Pursuant to the provisions of Section 607.034 and 607.037, Florida Statutes, the above-named corporation organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

AF 5-8-85

10 See signature and [illegible] under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6)

Signature Ann Fuller

Date May 7, 1985

Typed Name of Signing Officer Ann Fuller

Title Executive Secretary

Telephone Number

11 Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED ☐

CORPORATION NUMBER

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT
1986

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED
1986 MAR 20 PM 1:[illegible]

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

762042 Q
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AG
146 VIRGINIA DRIVE
WINTER PARK, FL 32789

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21: 103 No. Meridian
P.O. Box No. 22: 4087
City and State 23: Tallahassee, Fla 32315-1087
Zip Code 24: 32315-1087

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
02/22/1982	59-2249280	05/08/1985

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1985

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State 5
LYND, JOHN	P/D	1499 EDGEWOOD RANCH	ORLANDO, FL
MCGOWAN, LINDY	V/D	MUCHINSKI ROAD	TAMPA, FL
HINKLE, JAMES	V/D	SR 505	ROSELAND, FL
DONOHUE, TERR	S/T/D	HWY 15 RT 5 BX 1194	ORLANDO, FL
BUTTERFIELD, ROBERT	D	1520 EDGE WATER DR.	ORLANDO, FL
FULLER, ANN	E/S	N. MERIDIAN AVENUE	TALLAHASSEE, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

PATTILLO, JOHN T.
146 VIRGINIA DRIVE
WINTER PARK, FL 32789

8. Name and Address of New Registered Agent

Name 81:
Street Address (Do NOT Use P.O. Box Number) 82:
City and State 83: FL.
Zip Code 84:

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE 3-8-86
(Registered Agent Accepting Appointment)

$5.00 additional Fee required for Registered Agent change.

10. See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6)

Signature	Date
John H. Lynd	3/8/86

Typed Name of Signing Officer	Title	Telephone Number
JOHN LYND	PRESIDENT	305 295-2464

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2E034 (1-86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
1987 FEB 13 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

762042 D
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AG
103 N. MERIDIAN
P.O. BOX 4087
TALLAHASSEE, FL 32315-8087

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21: 206 S. Monroe Street, 32301
P.O. Box No 22: P.O. Box 38275
City and State 23: Tallahassee, Fla.
Zip Code 24: 32315-8275

3. Date Incorporated or Qualified To Do Business in Florida: 02/22/1982

4. Federal Employer Identification Number (FEIN): 59-2249280

5. Date of Last Report: 03/26/1986

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1986

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State 5
LYND, JOHN	P/D	1499 EDGEWOOD RANCH	ORLANDO, FL
MCGOWAN, LINDY	V/D	MUCHINSKI ROAD	TAMPA, FL
~~HINKLE, JAMES~~	~~V/D~~	~~SR 565~~	~~ROSELAND, FL~~
High, Jack	S/T/D	MUCHINSKI ROAD	TAMPA, FL.
~~DONOHUE, TERR~~	~~S/T/D~~	~~HWY 15 RT 5 BX 1194~~	~~ORLANDO, FL~~
DONOHUE, TERR	V/D	HWY 15 RT 5 BX 1194	ORLANDO, FL.
~~BUTTERFIELD, ROBERT~~	~~D~~	~~1520 EDGEWATER DR.~~	~~ORLANDO, FL~~
MERRITT, TAMMY	E/A	206 S. MONROE STREET	TALLAHASSEE, FL.
~~FULLER, ANN~~	~~E/S~~	~~N. MERIDIAN AVENUE~~	~~TALLAHASSEE, FL~~

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

PATTILLO, JOHN T.
146 VIRGINIA DRIVE
WINTER PARK, FL 32789

8. Name and Address of New Registered Agent

Name 81: SLEPIN, STEPHEN M.
Street Address 1 (Do NOT Use P.O. Box Number) 82: 1114 E. PARK AVENUE
Street Address 2 (Do NOT Use P.O. Box Number) 83: 1114 E. PARK AVENUE
City and State 84: TALLAHASSEE, FLA. FL.
Zip Code 85: 32301

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on: May 21, 1986

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.325 F.S.

SIGNATURE: [signature] DATE: 2-10-87
(Registered Agent - Typing or Printing Is Mandatory)

$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer signing must be listed in Block 6)

Signature	Date
Tammy Merritt	February 10, 1987
Typed Name of Signing Officer	**Title**
Ms. Tammy Merritt	Executive Administrator
Telephone Number	
(904) 224-7304	

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☒

$5 Additional Fee required for a Certificate of Status

CR2EC004 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST. FILED

DO NOT WRITE IN THIS SPACE

'89 MAR 23 PM 12:27

SECRETARY OF STATE
CORP RATIONS DIVISION
TALLAHASSEE, FLORIDA

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

762042
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AG
206 S. MONROE STREET (32301)
P.O. BOX 38275
TALLAHASSEE, FL 32315

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
02/22/1982	59-2249280	02/16/1987

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State 5
~~LYND, JOHN~~	~~P/D~~	~~1499 EDGEWOOD RANCH~~	~~ORLANDO, FL~~
1a McGowan, Lindy	P	Muchinski Road	Tampa, Fl.
~~MCGOWAN, LINDY~~	~~V/D~~	~~MUCHINSKI ROAD~~	~~TAMPA, FL~~
2a MacClellan, Edward	V	U.S. 301	Citra, Fl.
~~HIGH, JACK~~	~~S/T/D~~	~~MUCHINSKI ROAD~~	~~TAMPA, FL~~
3a Green, Clyde	V	Narcoossee Road	Orlando, Fl.
~~DONOHUE, TEAR~~	~~V/D~~	~~RR 13 BX 5 BX. 1194~~	~~ORLANDO, FL~~
4a Green, Alfred W.	S	Hwy 19	Palatka, Fl.
~~HERRIOT, TAMMY~~	~~D/A~~	~~206 S. MONROE ST.~~	~~TALLAHASSEE, FL.~~
5a High, Jack	T	Muchinski Road	Tampa, Fl.
6			
6a Strickland, Tammy M.	EA	206 S. Monroe Street	Tallahassee, Fl.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SLEPIN, STEPHEN M.

1114 E. PARK AVE.

TALLAHASSEE, FL. 32301

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____. I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida _____

11. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer or Director signing must be listed in Block 6.)

Signature	Date
Tammy M. Strickland	Feb. 8 1988
Typed Name of Signing Officer or Director: Tammy M. Strickland	Title: Executive Administrator
	Telephone Number: (904) 224-7304

12. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

APPROVED
DO NOT WRITE IN THIS SPACE
AND
FILED
1989 MAR 29 AM 8:58
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

ZIP + 4

762042 0
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AG
206 S. MONROE STREET (32301)
P.O. BOX 38275
TALLAHASSEE, FL. 32315-8275

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21: 411 E. College Ave., Suite 8
PO Box No 22: N/A
City and State 23:
Zip Code 24: 32301

3. Date Incorporated or Qualified To Do Business in Florida: 02/22/1982
4. Federal Employer Identification Number (FEIN): 59-2249280
5. Date of Last Report: 03/23/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
P/D	MCGOWAN, LINDY.	MUCHINSKI, ROAD.	TAMPA, FL.
V/D	MACCLELLAN, EDWARD.	U.S. 301	CITRA, FL.
V/D	GREEN, CLYDE.	NARCOOSSE ROAD.	ORLANDO, FL.
S/D	~~GREEN, CLYDE.~~ Green, Alfred	HWY 19	PALATKA, FL.
T	~~HICH, JACK.~~ Sheldon, Cindy	~~MUCHINSKI ROAD.~~ Rt. 2, Box 489	~~TAMPA, FL.~~ Lutha, Fl.
E/A	STRICKLAND, TAMMY M.	~~206 S. MONROE STREET.~~ 411 E. College Avenue	TALLAHASSEE, FL.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SLEPIN, STEPHEN M.
1114 E. PARK AVE.
TALLAHASSEE, FL. 32301

8. Name and Address of New Registered Agent

Name 81:
Street Address 1 (Do NOT Use P.O. Box Number) 82:
Street Address 2 (Do NOT Use P.O. Box Number) 83:
City and State 84: FL.
Zip Code 85:

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida

11. *See signature restrictions under instructions on reverse side of this form.*
I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer or Director signing must be listed in Block 6.)

Signature: Tammy M. Strickland
Date: Feb 9 1989
6. Typed Name of Signing Officer or Director: Tammy M. Strickland
Title: Executive Administrator
Telephone Number: (904) 224-7304

12. Should you desire a certificate of status check the box.
CERTIFICATE OF STATUS DESIRED ☐
$5 Additional Fee required for a Certificate of Status

CR2E040 (Rev. 1/89)

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

APPROVED AND FILED

PS0000187

DO NOT WRITE IN THIS SPACE

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1990 APR 12 PM 1:20

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $35 Required — Make Checks Payable To: Secretary of State.

1. Name and Address of Corporation Principal Office

762042 0

ZIP + 4 PRESORT
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AG
411 E. COLLEGE AVE., SUITE B
TALLAHASSEE, FL 32301-1562

If above address is incorrect in any way, enter the correct address in item 2 Include Zip Code

2 If Address in Block 1 is incorrect in any way, enter the correct address below P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida: 02/22/1982

4 FEI Number: 59-2249280

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
1 P/D	MCGOWAN, LINDY.	MUCHINSKI, ROAD.	TAMPA, FL.
1x P/D	Green, Clyde	Narcoossee Road	Orlando, Fl.
2 V/D	MACCLELLAN, EDWARD.	U.S. 301	CITRA, FL.
2x V/D	Russell, John	Mahan Drive	Tallahassee, Fl.
3 V/D	GREEN, CLYDE.	NARCOOSSE ROAD.	ORLANDO, FL.
3x V/D	Weierman, Alan	Selvitz Road	Ft. Pierce, Fl.
4 S/D	GREEN, ALFRED	HWY 19	PALATKA, FL.
4x S/D	McCormick, Wilford	Arlington Road	Jacksonville, Fl.
5 T	SHELDON, CINDY	RT. 2, BOX 489	LITHIA, FL.
5x T/D	Krazmien, Dale	Formosa Avenue	Winter Park, Fl.
6 E/A	STRICKLAND, TAMMY M.	411 E. COLLEGE AVE.	TALLAHASSEE, FL.
6x ED	Strickland, Tammy	411 E. College Avenue	Tallahassee, Fl.

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

SLEPIN, STEPHEN M.
1114 E. PARK AVE.
TALLAHASSEE, FL. 32301

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

9 Pursuant to the provisions of Sections 607.034 and 607.037 Florida Statutes the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors or

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10 I 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 effects as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

Signature: Tammy M. Strickland

Date: April 4, 1990

Typed Name of Signing Officer or Director	Title	Telephone Number
Tammy M. Strickland	Executive Director	(904) 224-7304

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT
1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APR30'91

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

Read Instructions on Other Side Before Making Entries

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation:

DOCUMENT # 762042 (0)

ZIP + 4 PRESORT

FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC.
~~411 E. COLLEGE AVE., SUITE B~~
~~TALLAHASSEE, FL 32301-1562~~

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address: HC 0-1- Box 78
22 P.O. Box No.:
23 City and State: PALATKA, FL
24 Zip Code: 32177

3. Date Incorporated or Qualified To Do Business in Florida: 02/22/1982

4. FEI Number: 59-2249280

FEI Number Applied For ☐
FEI Number Not Applicable ☐

5. $8.75 Additional Fee required for a Certificate of Status
CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
1	P/D	GREEN, CLYDE	NARCOOSSEE ROAD	ORLANDO, FL
1x				
2	V/D	RUSSELL, JOHN	MAHAN DRIVE	TALLAHASSEE, FL
2x				
3	V/D	~~WEIERMAN, ALAN~~ STEVEN ZEPP	~~SELVITZ ROAD~~ whitmire Rd	~~FT. PIERCE, FL~~ MILTON, FL
3x				
4	T/D	MCCORMICK, WILFORD	ARLINGTON ROAD	JACKSONVILLE FL
4x				
5	T	~~KRAZMIEN, DALE~~ Robin Smith	~~FORMOSE AVE~~ HEXSHIRE DR.	~~WINTER PARK, FL~~ JACKSONVILLE, FL
5x				
6	E/D	~~STRICKLAND, TAMMY~~ MAC Clellan, Ed	~~411 E. COLLEGE AVE.~~ STATE RD 310	~~TALLAHASSEE, FL.~~ PALATKA, FL.
6x				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SLEPIN, STEPHEN M.
1114 E. PARK AVE.
TALLAHASSEE, FL. 32301

8. Name and Address of New Registered Agent

81 Name:
82 Street Address 1 (Do NOT Use P.O. Box Number):
83 Street Address 2 (Do NOT Use P.O. Box Number):
84 City: FL. 85 Zip Code:

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. I 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; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 5 or on an attachment with an address.

SIGNATURE Ed MacClellan DATE April 26, 1991

Typed Name of Signing Officer or Director	Title	Telephone Number Daytime
Ed MacClellan	EXECUTIVE DIRECTOR	(904) 325-1916

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

FOLD

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

XII-902

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

(Typ) or (Print) All Information on Other Side Before Making Entries

FILING FEE $61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation DOCUMENT #762042 (0)

PROFIT

FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC.
H C O 1 BOX 78
PALATKA FL 32177

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 02/22/1982

3a. Date of Last Report: 04/30/1991

4. FEI Number: 59-2249280

FEI Number Applied For

FEI Number Not Applicable

5. $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1 1x	P/D	GREEN, CLYDE	NARCOOSSEE ROAD	ORLANDO, FL
2 2x	V/D	RUSSELL, JOHN	NAHAN DRIVE	TALLAHASSEE, FL
3 3x	V/D	ZEPP, STEVEN	WHITMIRE RD	MILTON, FL
4 4x	T/D	MCCORMICK, WILFORD	ARLINGTON ROAD	JACKSONVILLE FL
5 5x	T	SMITH, ROBIN	HEXCHIRE DR	JACKSONVILLE, FL
6	E/D	MACCLELLAN, ED	STATE RD 310	PALATKA, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SLEPIN, STEPHEN M.
1114 E. PARK AVE.
TALLAHASSEE, FL. 32301

8. Name and Address of New Registered Agent

81 Name: Ed Mac Clellan

82 Street Address 1 (Do NOT Use P.O. Box Number): H.C.O. - 1 - Box 78

83 Street Address 2 (Do NOT Use P.O. Box Number): 501 Co H.w. 310

84 City: PALATKA FL. | 85 Zip Code: 32177

9. Pursuant to the provisions of Section 607.0502 and/or Chapter 617 or Section 617.0500 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 607.0505, Florida Statutes.

SIGNATURE Ed Mac Clellan (Registered Agent Authorized Agent or Officer) DATE 3-3-92

10. The corporation has elected to be assessed under § 199.032, Florida Statutes. Yes ☐ No X (See other side for information on intangible tax.)

11. I 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; I further certify that I am an officer or director of the corporation or the receiver or other fiduciary empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 1 or Block 8 with an indication of my office.

SIGNATURE Ed Mac Clellan DATE

Typed or Printed Name of Signing Officer or Director: Ed MacClellan | Title: Executive Director | Telephone Number Daytime: (904) 325-1916

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional $5.00 to the filing fee. ☐

File Now. Filing Fee after May 1 is $225.00

APPROVED AND FILED

93 MAY -1 PM 4:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation DOCUMENT # 762042 (0)

FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC.
H C 0 1 BOX 78
PALATKA FL 32177
501-C-3. Not For Profit

DO NOT WRITE IN THIS SPACE

If above mailing address is incorrect or any way "marked" on current information and enter correction in Block 2.

FILING FEE $200.00	ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

3. Date Incorporated or Qualified: 02/22/1982
3a. Date of Last Report: 03/09/1992
4. FEI Number: 592249280 — Applied For / Not Applicable

2. Mailing Address (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) / Country (25)

2a. Principle Place of Business (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) / Country (30)

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $138.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MACCLELLAN, ED
H/C/O/ 1- BOX 78
501 CO H.W. 310
PALATKA FL 32177

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 City — 84 FL — 85 Zip Code — 86 Country

100000063207 1
-07706/93--01013--024
*****86.25 *****86.25

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS	13. OFFICERS AND DIRECTORS CHANGES
11 TITLE: P/D 12 NAME: GREEN, STEVE 13 ADDRESS: NARCOOSSEE ROAD 14 CITY ST ZIP: ORLANDO, FL	P/D Gepp, Steve Whitmire Road Milton, FL
21 TITLE: V/D 22 NAME: RUSSELL, JOHN 23 ADDRESS: MAHAN DRIVE 24 CITY ST ZIP: TALLAHASSEE, FL	V/D McCormick, Wilford Arlington Road Jacksonville, FL
31 TITLE: V/D 32 NAME: ZEPP, STEPHEN 33 ADDRESS: [illegible] 34 CITY ST ZIP: [illegible]	V/D Wierman, Alan Selvitz Road Fort Pierce, FL
41 TITLE: T/D 42 NAME: MCCORMICK, WILFORD 43 ADDRESS: ARLINGTON ROAD 44 CITY ST ZIP: [illegible]	S/D Smith, Robbie P.O. Box 51609 N/A Jacksonville, FL
51 TITLE: T 52 NAME: SMITH, ROBBIE 53 ADDRESS: HEXTER DR 54 CITY ST ZIP: JACKSONVILLE, FL	T/D Carlisle, Sam P.O. Box 560484 N/A Orlando, FL
61 TITLE: E/D 62 NAME: MACCLELLAN, ED 63 ADDRESS: STATE RD 310 64 CITY ST ZIP: PALATKA FL	61 Same 62 63 64

14. I 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; I further certify that I am an officer or director of the corporation or the receiver or trustee or authorized to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or 13 above, or on an attachment with an (X) in (X) box.

SIGNATURE Ed MacClellan DATE May 12, 1993

Print/Type Name of Signing Officer or Director	Title(s)	Daytime Telephone Number
Ed MacClellan	Executive Director	(904)325-1916

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

AND FILED

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

94 MAR 31 PM 7:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AGENCIES, INC.

DOCUMENT # 762042 (0)

Mailing Address
H C O 1 BOX 78
PALATKA FL 32177

Principal Place of Business
H C O 1 BOX 78
PALATKA FL 32177

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/22/1982
3a. Date of Last Report: 05/01/1993

2. Mailing Address
21
2a. Principal Place of Business
26
Suite, Apt. #, etc.
22
Suite, Apt. #, etc.
27
City & State
23
City & State
28
Zip 24 Country 25
Zip 29 Country 30

4. FEI Number: 59-2249280
Applied For
N/A Applicable

5. Certificate of Status Desired $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution
7. Nonprofit Exempt from $150.75 Supplemental Fee: X
$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes / X No

9. Name and Address of Current Registered Agent

MACCLELLAN, ED
H/C/O/ 1- BOX 78
501 CO H.W. 310
PALATKA FL 32177

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 Section 607.0502 and 607.1508 or 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 607.0505 or 617.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Affidavit Approving Appointment - Not Required When Reinstating)

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
31 TITLE	P/D	41 TITLE	
32 NAME	ZEPP, STEVE	42 NAME	
33 STREET ADDRESS	WHITMIRE ROAD	43 STREET ADDRESS	
34 CITY ST ZIP	MILTON FL	44 CITY ST ZIP	
35 TITLE	V/D	45 TITLE	
36 NAME	MCCORMICK, WILFORD	46 NAME	
37 STREET ADDRESS	ARLINGTON ROAD	47 STREET ADDRESS	
38 CITY ST ZIP	JACKSONVILLE FL	48 CITY ST ZIP	
39 TITLE	V/D	49 TITLE	
40 NAME	WIERMAN, ALAN	50 NAME	
41 STREET ADDRESS	~~SELVITZ ROAD~~	51 STREET ADDRESS	602 S.W. Biltmore St.
42 CITY ST ZIP	~~FORT PIERCE FL~~	52 CITY ST ZIP	Port St Lucie, FL 34983
43 TITLE	S/D	53 TITLE	
44 NAME	SMITH, ROBBIE	54 NAME	
45 STREET ADDRESS	~~PO BOX 510001-A~~	55 STREET ADDRESS	~~PO~~ 482-2 Heckscher Dr.
46 CITY ST ZIP	JACKSONVILLE FL	56 CITY ST ZIP	Jacksonville 32226
47 TITLE	T/D	57 TITLE	
48 NAME	~~CARLISLE, SAM~~	58 NAME	Joan E. Consolver
49 STREET ADDRESS	PO BOX 560784 MIA	59 STREET ADDRESS	1451 Edgewood Ranch Road
50 CITY ST ZIP	~~ORLANDO FL~~	60 CITY ST ZIP	Orlando, FL 32811
61 TITLE	E/D	61 TITLE	
62 NAME	MACCLELLAN, ED	62 NAME	
63 STREET ADDRESS	~~STATE RD 310~~	63 STREET ADDRESS	501 County Rd 310 (HCO-1-Box 78)
64 CITY ST ZIP	PALATKA FL	64 CITY ST ZIP	Palatka FL 32177

14. I do hereby certify that the information supplied with this filing is true, correct and complete and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I realize the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or 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: A. Edward MacClellan 3/24/94 904 325-1916
A. Edward MacClellan
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 23 AM 9:04

DO NOT WRITE IN THIS SPACE

DOCUMENT # 762042 (0)

1. Corporation Name
FLORIDA ASSOCIATION OF CHRISTIAN CHILD-CARING AG ENCIES, INC.

Principal Place of Business
H C O 1 BOX 78
PALATKA FL 32177

Mailing Address
H C O 1 BOX 78
PALATKA FL 32177

2. Principal Place of Business — 21 | Suite, Apt. #, etc. 22 | City & State 23 | Zip 24 | Country 25
2a. Mailing Address — 26 | Suite, Apt. #, etc. 27 | City & State 28 | Zip 29 | Country 30

3. Date Incorporated or Qualified: 02/22/1982
3a. Date of Last Report: 03/31/1994
4. FEI Number: 59-2249280 ☐ Applied For ☐ Not Applicable
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
MACCLELLAN, ED
H/C/O/ 1- BOX 78
501 CO H.W. 310
PALATKA FL 32177

10. Name and Address of New Registered Agent
31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City — FL — 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Ed MacClellan [signature] 1-13-95
Signature, typed or printed name of registered agent and title if applicable — REQUIRED: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ZEPP, STEVE
STREET ADDRESS	WHITMIRE ROAD
CITY-ST-ZIP	MILTON FL
TITLE	VD
NAME	MCCORMICK, WILFORD
STREET ADDRESS	ARLINGTON ROAD
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	VD
NAME	WIERMAN, ALAN
STREET ADDRESS	602 SW BILTMORE ST
CITY-ST-ZIP	PORT ST LUCIE FL
TITLE	SD
NAME	SMITH, ROBBIE
STREET ADDRESS	4822 HECKSCHER DR
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	TD
NAME	CONSOLVER, JOAN E
STREET ADDRESS	1451 EDGEWOOD RANCH RD
CITY-ST-ZIP	ORLANDO FL
TITLE	ED
NAME	MACCLELLAN, ED
STREET ADDRESS	501 COUNTY RD 310 (HCO-1-BOX 78)
CITY-ST-ZIP	PALATKA FL

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 is voluntarily furnished and 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: Ed MacClellan [signature] 1-13-95 904-325-1916
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0024425