

0-12-97 B- 60464 C
FILE NOW: FILING FEE IS \$61.25

FILED
May 12 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 766260 (4)			
1. Corporation Name STOP-GAP OF NORTH BREVARD, INC.			
Principal Place of Business HARRY T. MOORE SOCIAL SERVICE CENTER 725 DELEON AVE. TITUSVILLE FL 32780 US		Mailing Address C/O CAROL SELPH Sam DeCarlo 725 DELEON AVE. TITUSVILLE FL 32780-4115 US	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
25		30	
9. Name and Address of Current Registered Agent CAROL SELPH, C/O STOP GAP 725 DELEON AVE TITUSVILLE FL 32780		10. Name and Address of New Registered Agent 81 Name Dawn E. Garand 82 Street Address (P.O. Box Number is Not Acceptable) 7505 Turkey Pt. Dr. 83 84 City Titusville, FL 85 Zip Code 32780	
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: Dawn E. Garand DATE: 4/30/97 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	
CD DECARLO, SAM 3905 MT. STERLING TITUSVILLE FL 32780		Change Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	
D RIGGS, TIMOTHY 7430 N US HWY 1 #206 COCOA FL 32927		CD-D Billie Terwilleger 3111 Finsterwald Dr. Titusville, FL 32780	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
VD HUBINGER, BARBARA 201 SINGELTON AVE. TITUSVILLE FL 32796		Change Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
S DURBIN, LOU 178 PARK LANE TITUSVILLE, FL 00000		Change Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TD SELPH, CAROL 1502 GUDAHIL DR TITUSVILLE FL		Dawn Garand 7505 Turkey Pt. Dr. Titusville, FL 32780	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	
Change Addition		Change Addition	
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: X Billie Terwilleger DATE: 4/30/97 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 268-6033			



CR2E037 (9/96)