FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # 770763 (1)

1. Corporation Name

PALM BEACH COUNTY JUVENILE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
DEPT. OF JUVENILE JUSTICE 111 GEORGIA AVE. WEST PALM BEACH FL 33401	PALM BEACH COUNTY JUVENILE ASSOCN., INC. P. O. BOX 3592 WEST PALM BCH. FL 33402-3592

2. Principal Place of Business 21 Dept. of Juvenile Justice	2a. Mailing Address 26	3. Date Incorporated or Qualified 10/17/1983	3a. Date of Last Report 05/16/1995
Suite, Apt. #, etc. 22 111 S. SAPODILLA Ave #207	Suite, Apt. #, etc. 27	4. FEI Number 59-2422001	☐ Applied For ☐ Not Applicable
City & State 23 West Palm Beach, FL	City & State 28	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip / Country 24 33401 25	Zip / Country 29 30	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HOWARD, THOMAS L P.A. 675 W. INDIANTOWN RD., STE. 103 JUPITER FL 33458	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 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
Signature, typed or printed name of registered agent, and title if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD YESKEY, DENNIS L 111 GEORGIA AVE. WEST PALM BEACH FL 33401	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	Treasurer Stephen Bardy 111 S. Sapodilla Ave, Suite 207 West Palm Beach, FL 33406	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BREWER, EDMUND 3340 FOREST HILL BLVD. W. PALM BCH. FL	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	V Seth Bernstein 2500 Metrocentre Blvd., Suite 3 West Palm Beach, FL 33407	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DAWSON, MARIA 111 GEORGIA AVE. WEST PALM BEACH FL 33401	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	V Sheila Bewsee 2677 Forest Hill Blvd, [redacted] #106 West Palm Beach, FL 33406	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MORGAN, LINDA 1117 WEST LANTANA RD., B#3 LANTANA FL 33462	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	S Maria Dawson 16450 SE Federal Hwy Hobe Sound, FL 33455	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MANAKAS, BARBARA 1117 WEST LANTANA RD., B#2, R#161 LANTANA FL 33462	☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	V Mary-Michael Evans 3600 Broadway West Palm Beach, FL 33407	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD NAPOLITANO, FRANK 1117 WEST LANTANA RD., B#3 LANTANA FL 33462	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	P Dennis Yeskey 111 S. Sapodilla Ave, Suite 207 West Palm Beach, FL 33401	☒ Change ☐ Addition

CR2E037 (12/95)

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)(k), 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: Stephen Bardy 1/31/96 (407) 837-5736
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #