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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # M79945

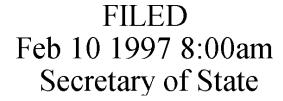
(5)

FAMILY GROWTH AND DEVELOPMENT, JOSEPH A. MACCARR ONE, PSY.D., P.A.

Principal Place of Business

Mailing Address

M MOCEDIA MACCADDONE





1375 S SEMORAN BLVD. #139 WINTER PARK FL 32792		1975 S SEMO	1375 S SEMORAN BLVD #139 WINTER PARK FL 32792-5513					
						3. Date incorporated or Qualified	3a. Date of La	· I
9 D	ace of Business	28. Mailing Ad	Idroop			05/04/1988 4. FEI Number	05/09/19	
─ ┐ '	ace or business		├── ┐					
Suite, Apt. 1	# ofc	Suite Apt	Suite, Apt. #, etc.			SQ 75 Additional		
22		27	27			5. Certificate of Status Desired	Fee Required	
City & State	2	City & Stat	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution	LJ Ad	Ided to Fees
Z(p)	Country	Z _i p	ļ ₁	Country		8. This corporation has liability for i		der s. 199.032,
24	[25]	29	30				Yes No	
	9. Name and Address of Cui	rrent Hegistered Agen	<u> </u>	81	Name	10. Name and Address of New Re	pstered Agent	
	CARRONE, JOSEPH A.			61	-INATHO			
	s semoran blvd			82	Street Ad	dress (P.O. Box Number is Not Acceptab	le)	
#13 1								
WINT	ier Park fl. 32792			83				
				84	City		85	Zip Code
							FL	
office or re agent. Lar SIGNATURE	egistered agent, or both, in the S m familiar with, and accept the ob	tate of Florida, Such ch bligations of, Section 60	ange was author 07.0505, Florida	rized by Statutes	the corpor	rporation submits this statement for the p ation's board of directors. I hereby accep	orpose of chang of the appointmen	nt as registered
	Slignature, typed or publied name of registeres	·		~~~	nt signature req	ulred when reinstating)	DATE	
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PST		DELETE	I.1 TITLE			L Cha	ange [] Addition
NAME	MACCARRONE, JOSEPH A		1	.2 NAME	}			
STREET ADDRESS	1375 S SEMORAN BLVD 13	319	1	.3 STREET	ADDRESS			
CITY-ST-ZIP	WINTER PARK FL			.4 CITY - S	T-ZIP			
TITLE	VD		DELETE	2.1 TITLE	\		L Cha	ange L Addition
NAME	MACCARRONE, JOSEPH A		1	2 NAME				
STREET ADDRESS	1375 S SEMORAN BLVD 13	319	2	3 STREET	ADDRESS			
CITY-ST-ZIP	WINTER PARK FL			4 CITY-S	ST-ZIP			
TITLE		Ļ		3.1 TITLE			Cha	ange [] Addition
NAME				3.2 NAME				
STREET ADDRESS			3	3.3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. CITY - S	ST- ZIP			F 1 x 2 202
TITLE		Ш		4.1 TITLE			∐ Cha	ange [_] Addition
NAME			1	1. 2 NAME	Į			ļ
STREET ADDRESS				4.3 STREET				
CITY-ST-ZIP				1.4 CITY - S	T-ZIP		1 m 2.	
TITLE				5.1 TITLE			Cha	ange [] Addition
NAM!				5.2 NAME				-
STREET ADDRESS				5.3 STREET	ADDRESS			
C/TY - ST - ZIP				5.4 CITY-S	T-ZIP			
TETLE		니	ŀ	6 1 TITLE			☐ Cha	ange [_] Addition
NAME			I *	62 NAME	ţ			
STREET ADDRESS				63 STREET	ADDRESS			
CITY - ST - ZIP		T. T. 33 at 1 at 2		64 CITY-S		ed in Section 119 07(3)(i). Florida Statute		

information indicated on this annual report or supplied with this time goes not quality 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 607, Florida Statutes; and that my name appears in Block 13 if changes, or on as attachment with an address.

SIGNATURE: