FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

524 JULIA ST

NEW SMYRNA BEACH FL

STREET ADDRESS



FLORIDA DEPARIMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

N05016

(3)

CHEMICAL PEOPLE FOR DRUG FREE YOUTH, INC.

FILED
Jul 30 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address 1437 S. DIXIE FREEWAY 3. DixIE FREEWAY 3. Data Incorporated or Qualified	AFT MINTE WANEL MINEL LAND
1493 C DIVIE EDERWAY	### B1811 OF### OF### F#B#
NEW SMYRNA BEACH FL 32168 US 1437 S. DIXIE PREEWAY NEW SMYRNA BEACH FL 32168 US 3. Date Incorporated or Qualified 09/06/1984 4. FEI Number	Applied For
59-2455801	Not Applicable
2. Principal Place of Business 2a. Mailing Address 2b. Certificate of Status Desired 3b. Certificate of Status Desired	8.75 Additional Fee Required
27 Trust Fund Contribution	55.00 May Be Added to Fees
City & State City & State 7. Is this nonprofit corporation a homeowners as 28 28	
Zip Country Zip Country 8. This corporation owes or has paid the current	
24 25 29 30 Personal Property Tax due June 30.	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Age	nt
81 Name CHES LER ACRES	
DOROTHY E. LARSON 2051 PIONEER TRAIL LOT 72 Street Address (P.O. Box Number is Not Acceptable) 1601 BEACON ST.	
APT. #6 83	
NEW SMYNA BEACH FL 32168	5 Zip Code
NEW SMYRNA BEACH	132168
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 che 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 appoint agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.	inging its registered ment as registered
1/2 7 / // // // // // // // // // // // //	las
SIGNATURE // Signature, typed or printed name of registered agent and title II applicable (NOTE: Registered Agent signature required when reinstating) DATE	770-
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIR	RECTORS IN 12
	Change Addition
NAME ACRES, KATY 1.2 NAME GALLIANO, ROSA	
STREET ADDRESS 1601 BEACON ST 1.3 STREET ADDRESS 1829 WILLOW OAK DRIVE	
CITY-ST-ZIP NEW SMYRNA BCH FL 1.4 CITY-ST-ZIP EDGEWATER, FL 32141	
	Change X Addition
MCPARTLAND, ATHENA 22 NAME ACRES, CHESTER	
STREET ADDRESS 523 S PENINSULA AVE 2.3 STREET ADDRESS 1601 BEACON ST.	
CITY-ST-ZIP NEW SMYRNA BEACH FL 24 CITY-ST-ZIP NEW SMYRNA BEACH, FL 32169	
CITY-ST-ZIP NEW SMYRNA BEACH FL 2 4 CITY-ST-ZIP NEW SMYRNA BEACH, FL 32169 TITLE SD DELETE 31 TITLE D	Change Addition
CITY-ST-ZIP NEW SMYRNA BEACH FL 10 DELETE 11 DELETE 12 4 CITY-ST-ZIP NEW SMYRNA BEACH, FL 32169 NAME NAME NEW SMYRNA BEACH, FL 32169 NAME NAME NAME NAME NAME NEW SMYRNA BEACH, FL 32169 NAME NAME NAME NAME NAME NAME NAME NAME NEW SMYRNA BEACH, FL 32169 NAME N	Change
CITY-ST-ZIP NEW SMYRNA BEACH FL 10 CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32169 10 TITLE NAME WENDORFF-FAIR, RUTH STREET ADDRESS 123 LAKE FAIRGREEN CIRCLE 13 STREET ADDRESS 124 CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32169 24 CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32169 STATE D STATE ADDRESS 124 CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32169 STATE D STATE ADDRESS 125 LAKE FAIRGREEN CIRCLE	Change Addition
CITY-ST-ZIP NEW SMYRNA BEACH FL 1 A CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32169 1 TITLE NAME WENDORFF-FAIR, RUTH STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32169 31 TITLE D FAIR, RUTH 32 NAME FAIR, RUTH 33 STREET ADDRESS 123 LAKE FAIRGREEN CIRCLE CITY-ST-ZIP NEW SMYRNA BCH FL 34. CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32168	
CITY-ST-ZIP NEW SMYRNA BEACH FL 10 DELETE 11 TITLE SD NAME WENDORFF-FAIR, RUTH STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH, FL 32169 XD NAME FAIR, RUTH 32 NAME FAIR, RUTH 33 STREET ADDRESS 123 LAKE FAIRGREEN CIRCLE 34 CITY-ST-ZIP NEW SMYRNA BCH FL DELETE 41 TITLE D LAKE FAIRGREEN CIRCLE 41 TITLE D LAKE FAIRGREEN CIRCLE 14 TITLE D LAKE FAIRGREEN CIRCLE 14 TITLE D LAKE FAIRGREEN CIRCLE 15 AL CITY-ST-ZIP NEW SMYRNA BEACH, FL 32168 LAT TITLE D LAT TITLE LAT TITLE D LAT TITLE LAT TITLE D LAT TITLE D LAT TITLE LAT TITLE D LAT TITLE LAT TITLE D LAT TITLE LAT TITLE D	Change 🔼 Addition
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CITY-ST-ZIP NEW SMYRNA BEACH FL 10TLE SD NAME WENDORFF-FAIR, RUTH STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL 32 NAME STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32169 XI 32 NAME FAIR, RUTH 33 STREET ADDRESS 123 LAKE FAIRGREEN CIRCLE 34.CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32168 11TILE DELETE 4.1 TITLE DELETE ALCITY-ST-ZIP NEW SMYRNA BEACH, FL, 32168 THE BOGEY CIRCLE STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL XI DELETE DELETE 1. TITLE D STAIER, BUDDY STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL XI DELETE STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH, FL, 32168 STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL 32 NAME STAIER, BUDDY 5.2 NAME STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL 32 CITY-ST-ZIP NEW SMYRNA BEACH FL NEW SM	Change 🔼 Addition EF, N.S.B. 1, NORTH

14. Thereby 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 mistee 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?

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

R2E037 (10/97)