FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

(4)

PATHWAYS FOR YOUTH AND FAMILIES, INC.

FILED May 14 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					1 10011102 011 00110 10103 10110 01100 3111 01011 8101	I BADAN MEDIN DEDAN BABAH EDDA	
333 S.W. 28TH ST 333 S.W. 28TH ST FT. LAUDERDALE FL 33315 US US		115			3. Date Incorporated or Qualified 06/17/1985 4. FEI Number	Applied For	
					59-2564475	Not Applicable	
2. Principal Place of Business 28. Mailing Address 21 1001 S. Andrews Ave. 26 1001 S. Andrews			5. Certificate of Status Desired PR \$8.75 Additional				
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27					Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State 23 Ft. Lauderdale, Fl. 28 Ft. Lauderda		dale,	te, F1. 7. Is this nonprofit corporation a homeowners association? ☐ Yes ☑ No				
Zip Country 24 33316 25 US	Ζίρ 29 33316		untry US		8. This corporation owes or has raid the current year Intangible Personal Property Tax due June 30. Yes X No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
			81	Name			
WORLDWIDE CORPORATE SERVICES INC. ONE FINANCIAL PLAZA			82 Street Address (P.O. Box Number is Not Acceptable)				
			Silost Addition (1.0. Day Mainton to Not Addeptitible)				
STE. 2626			83				
FT. LAUDERDALE FL 33394			84	City		85 Zip Code	
			FL •• ••				
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 Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rehetating) DATE							
		13.	ea Age	n signature ri	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE D			TLE			Change Addition	
NAME JAFFE, MARTIN			AME		Martin Jaffe	At comme	
STREET ADDRESS 3111 STIRLING RD.			1.3 STREET ADDRESS 1001 S. Andrews Ave.				
CITY-ST-ZIP FT. LAUDERDALE FL			1.4 CITY - ST - ZIP		736 7 3 3		
			TITLE	- 217	Ft. Lauderdale, Fl. 33316	Change Addition	
•••	**************************************		IAME			.	
4000 44 5000000000000000000000000000000			2.3 STREET ADDRESS		Caryn Goldenberg Carvo 1001 S. Andrews Ave.		
FT LAUGEDDALE FL			2. 4 CITY-ST-ZIP		Ft. Lauderdale, Fl. 33316		
TITLE D			TILE	1		Change Addition	
ME GOBER, MARA 321		IAME		Mara Gober	· ·		
STREET ADDRESS 3072 OLD STILL LANE 335		TREET	ADDRESS	1001 S. Andrews Ave.			
		CITY-S	T-ZIP	Et Landardalo 33316			
тите РО	☐ DELETE	4.1 T			D 2	Change Addition	
NAME GOLDENBERG, STEPHEN						1	
		4.21	NAME	l	Stephen Goldenberg		

63 STREET ADDRESS
OTY-ST-ZP
FT LAUDERDALE FL 33304

64 CITY-ST-ZIP
FT. Laurier dale, F1 ... 33316

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.7(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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

Jeff Thomas

VΡ

Paula Revene

1001 S. Andrews Ave.

. Laudordale. Fl. 33316

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

■ DELETE

FT. LAUDERDALE FL

340 SUNSET DR #806

FT LAUDERDALE FL 33301

BANGERTER, SHANNON

ABRAMS, MURIEL

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

(acu) < > 3-1847

Addition

Addition