

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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # N11025 (6)

1. Corporation Name

FRIENDS OF CHILDREN AND FAMILIES, INC.

Principal Place of Business

Mailing Address

500 WINDERLEY PLACE, STE 110
MAITLAND FL 32751
US

500 WINDERLEY PLACE, STE 110
MAITLAND FL 32751
US



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/10/1985

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2735429

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

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

10. Name and Address of New Registered Agent

MURRAY, GLORIA
2887 HARBOUR GRACE COURT
APOPKA FL 32701

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

Signature, typed or printed name of registered agent and title in applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME MARTIR, LUIS R JR.
STREET ADDRESS 4957 COURTLAND LOOP
CITY-STATE-ZIP WINTER SPRINGS FL

TITLE ☐ DELETE

NAME MURRAY, GLORIA
STREET ADDRESS 2887 HARBOUR GRACE COURT
CITY-STATE-ZIP APOPKA FL

TITLE ☐ DELETE

NAME MOORE, DEBRA
STREET ADDRESS 606C PARK CIRCLE
CITY-STATE-ZIP WINTER SPRINGS FL

TITLE ☐ DELETE

NAME HERNANDEZ, FELIX
STREET ADDRESS 610 COSA PARK CTO
CITY-STATE-ZIP WINTER SPRINGS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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:

Luis R. Martir, Jr.

5/1/96

(407)660-2226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)