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NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 14 1997 8:00am

Secretary of State

DOCUMENT # N12276

(4)

CERTIFICATION BOARD FOR ADDICTION PROFESSIONALS OF FLORIDA, INC.

Principal Place					
	of Business	Mailing Address		1 12 1 (18) 831 3131 310 10 11 11 11 11 11 11 11	
WHEAL MCGARRY WHEAL MCGARRY		_			
1715 S. GAOSDEN STREET TALLAHASSEE FL 32301		1715 S. GADSDEN STREET TALLAHASSEE FL 32301-5505			
				3. Date Incorporated or Qualified 11/26/1985	3a. Date of Last Report 03/21/1996
2. Principal Pia	ace of Business	28. Mailing Address		4. FEI Number	Applied For
21		26		59-2622949	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
23 Zip	Country	28 Zip	Country	This corporation has liability for it.	
24]	25	29	30	· · · · · · · · · · · · · · · · · · ·	Yes No
241	9. Name and Address of Curre		[50]	10. Name and Address of New Re	
			B1 Name		
MCGARRY, NEAL			82 Street Add	dress (P.O. Box Number is Not Acceptab	ale)
839-B EAST PARK AVE TALLAHASSEE FL 32301		OF SHOOT AND	areas (1.0, box reamber is real recognist		
			83		
all almost as to a	· · · · · · · · · · · · · · · · · · ·		84 City		85 Zip Code
			1-1-3		
11. Pursuant to	the provisions of Sections 617.05	502 and 617.1508, Florida Stati	ites, the above-named cor	poration submits this statement for the pation's board of directors. I hereby accept	ourpose of changing its registered
office or re	potered agent, or both, in the Sta	ite of Florida. Such change was	authorized by the corpora	ation's poard or directors. Thereby accep	of the appointment as registered
agent.	namiliai with, and accept the ob-	ilgations of, Section 617.0003, r	lorida Statutes.		
	applicativity, and accept the obtained	igations of, Section 617.0505, F	Florida Statutes.		
agent. SIGNATURE	gnature, typed or printed name of registered a	agent and title if applicable (NC	DTF Registered Agent signature requ	ured when reinstating)	DATE
SIGNATURE	gnature, typed or printed name of registered a	agent and title if applicable (NO	DTE Registered Agent signature requ		DATE CERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE	gnature, typed or printed name of registered a OFFICERS A	agent and title if applicable (NC	TE Registered Agent signature requirements 13.	ured when reinstating)	DATE CERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	OFFICERS A D MICHAEL, STEPHEN	egent and title if applicable (NO ND DIRECTORS DELETE	TI Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME	ured when reinstating)	DATE CERS AND DIRECTORS IN 12
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The Board of Directors

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President

Richard Anderson

Mental Health Services Gainesville

Treasurer

Frank Francisco

Human Services Assoc. Orlando

Secretary Kay Doughty

Annual Report 1995-96

DACCO Brandon Stephen Michael

First Union National Bank Jacksonville

W. Chester Bell Stewart Marchman Center Daytona Beach

Daytona Deach

Deborah Dain

Human Services Assoc.

Orlando

Gerri Goldman C.A.R.E. Panama City

Robert Scarlatti

American Family Centers Fort Lauderdale

Maud Boleman

Broward Sheriff's Office Plantation

Frances Bucci

St. Petersburg Junior College Criminal Justice Institute St. Petersburg

Paul Dickerson
Galeway Community Service

Gateway Community Ser Jacksonville Genie Skypek The Skypek Group

The Skypek Group Tampa

John Mullen Pompano **Richard Tibbetts** Jacksonville Beach Jan McArdle Center for Drug-Free Living Orlando

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Orlando

Kevin Lewis SWAFS Fort Myers Lois Devitt Center For Drug-Free Living Orlando

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Renaissance Institute, Inc.
Boca Raton

Ralph Singer Cooper City Page 6