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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham**,

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N25561

(4)

CENTRAL FLORIDA CRIMINAL JUSTICE COUNCIL, INC.

FILED
May 20 1997 8:00am
Secretary of State



113 COVE LAKE BR ROOM #6F PURKE_CITY_CORNEQUE LONGWOOD FI, 22779 US Solito Act ** citic 27	Disabat Disabat Disabas	Malling Address		-	
Description	Principal Place of Business	Malling Address			
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S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name CASHIN, FRANK 113 COVE LAKE DR LONGWOOD FL 32779 32 Street Address (P.O. Box Number is Not Acceptable) 33 34 City FL 35 26 City FL 36 City FL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Chan		ZONDO	ountry	8. This corporation has liability for in	
CASHIN, FRANK 113 COVE LAKE DR LONGWOOD FL 32779 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 registere office or registered agent, or both, in the State of Florida Such change was authorized by the corporation submits this statement for the purpose of changing its registere office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere office or registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere office or registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere office of corporation submits this statement for the purpose of changing its registere office of corporation submits this statement for the purpose of changing its registere agent, above agent appears agent agent, above corporation submits this statement for the purpose of changing its registere office agent, above corporation submits this statement for the purpose of changing its registere agent, above corporation submits this statement for the purpose of changing its registere agent, above corporation submits this statement for the purpose of changing its registere agent, above corporation submits this statement for the purpose of changing its registere agent, above corporation above amove departs agent, above corporation above a			DENALINOC		
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14. I do hereby 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	CITY-ST-ZIP ORLANDO FL		4 CITY-ST-ZIP	Lin Contine 110 07/2/61 Florida Cartina	. I further earlify 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 rightee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 is changed, or on an attaching it with an address.

SIGNATURE:

about Castle 3/18/27 to7-869-09