

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N32605

(0)

1. Corporation Name

ADOPTIONS BY CHOICE, INC.

Principal Place of Business

Mailing Address

% 4102 W. LINEBAUGH AVENUE  
SUITE 200  
TAMPA FL 33624

% 4102 W. LINEBAUGH AVENUE  
SUITE 200  
TAMPA FL 33624

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

WEST, DEBRA L.  
4102 W. LINEBAUGH AVENUE  
SUITE 200  
TAMPA FL 33624

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, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE [ ] DELETE

1.2 NAME MAY VICKI

1.3 STREET ADDRESS 932 ROYAL BIRKDALE DR

1.4 CITY-STATE-ZIP TARPON SPRINGS FL

2.1 TITLE STD [ ] DELETE

2.2 NAME GROSCHOPF, EILEEN

2.3 STREET ADDRESS 222 SARATOGA COURT

2.4 CITY-STATE-ZIP OSPREY FL

3.1 TITLE T [ ] DELETE

3.2 NAME NIPPENBERGER, EDIE

3.3 STREET ADDRESS 314 MIRAVISTA DR

3.4 CITY-STATE-ZIP DUNEDIN FL

4.1 TITLE T [ ] DELETE

4.2 NAME ZELASKO, SUE

4.3 STREET ADDRESS 2705 CAMDEN

4.4 CITY-STATE-ZIP COLUMBUS OH

5.1 TITLE T [ ] DELETE

5.2 NAME DORMOIS BEVERLY

5.3 STREET ADDRESS 2834 ST ANDREWS BLVD

5.4 CITY-STATE-ZIP TARPON SPRINGS FL

6.1 TITLE [ ] DELETE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

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

14. I 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-21-98

Date

813-960-2229

Daytime Phone #

CR2E037 (5/98)

FILED  
Oct 08 1998 8:00am  
Secretary of State



3. Date Incorporated or Qualified

06/01/1989

4. FEI Number

31-1277875

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

7. Is this nonprofit corporation a homeowners association?

[ ] Yes [ ] No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. [ ] Yes [ ] No

10. Name and Address of New Registered Agent