FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jun 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # N340

(9)

HANDICAP ADVOCACY COUNCIL, INC.				
Principal Place	e of Businoss	Mailing Address		- I DADILIAN BARR ALLIK BADAN BANKI ELIKI BADAN DIBAN BADAN BADAN BADAN BARAN BADAN
5615 26 ST W 5615 26 ST W BRADENTON FL 34207 BRADENTON FL 34207-3516		6		
				3. Date Incorporated or Qualified 3a. Date of Last Report 06/19/1996
2, Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number Applied For 65-0205448 Not Applied For
Suite, Apt.	#, etc.	Suito, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	в	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation has liability for intangible tax under s. 199.032, Florida Statutes
	9. Name and Address of Current			10. Name and Address of New Registered Agent
			81 Name	
LITTLE, MELTON, H. 5615 26TH ST. W.			82 Street	Address (P.O. Box Number is Not Acceptable)
	NTON FL 34207		83	
	t e		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				
12.	Signature, typod or printed name of registered agent OFFICERS AND		: Registered Agent signature 13.	c required when reInstating) DATE ADDITIONS/CHANGES TO OFFICE RS AND DIRECTORS IN 12
TITLE	VD OF FIGURE	DELETE	1.1 T(TLE	Change Addition
NAME	MCKAY, P J	_	1.2 NAME	
STREET ADDRESS	3275 BENEVA RD.		1.3 STREET ADDRESS	BEELER, DICK 1801 S.E.Sth PL. CAPE COPAL - 7/a 33990
CITY-ST-ZIP	SARSOTA FL		1.4 CITY- ST - ZIP	Cape Coral - 7/a 33990
TITLE	TP	DELETE	2 1 TITLE	Change Addition
NAME	grubbs, dixie		2 2 NAME	
STREET ADDRESS	5416 38TH ST. E.		2.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL		2. 4 CITY - \$1 - ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	Change Addition
NAME	LITTLE, MELTON H.		3.2 NAME	
STREET ADDRESS	5615 26TH ST W		3.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL		3.4. CITY-ST-ZIP	
TITLE	D ALLEN DODEDY	☐ DELETE	4.1 TITLE	Change Addition
NAME	ALLEN, ROBERT		4. 2 NAME	
STREET ADDRESS	112 66TH ST CT. EAST		4.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	DELETE	4.4 C(TY - ST - ZIP	Change Addition
1	ALLEN, ARLINE	C victit	5.1 TITLE	C Ottange C Audition
NAME STREET ADDRESS	112 66TH ST. CT. EAST		5.2 NAME 5.3 STREET ADDRESS	
	BRADENTON FL			
CITY-ST-ZIP TITLE	SD	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Change Addition
NAME	DOWNS, JESSIE G.		6.2 NAME	C. Orango C. Municin
STREET ADDRESS	1508 WATE OAK WAY SOUTH	•	6.3 STREET ADDRESS	

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 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 receivor 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.