

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N37717 (8)
 Corporation Name
ASSOCIATION FOR COUPLES IN MARRIAGE ENRICHMENT (ACME) OF FLORIDA, INC.



Principal Place of Business		Mailing Address	
1100 SE 5TH COURT SUITE 24 POMPANO BEACH FL 33060-8160		1100 SE 5TH COURT SUITE 24 POMPANO BEACH FL 33060-8160	
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	24	30
		25	

3. Date Incorporated or Qualified
04/17/1990

4. FEI Number
65-0189795

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

9. Name and Address of Current Registered Agent

DIANE W. CENTORINO, ESQ.
CENTORINO & WATEROUS, P.A.
SUITE 111, 915 MIDDLE RIVER DR.
FT. LAUDERDALE FL 33304

10. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MORGAN, HARREL	1.2 NAME	ALLYN JACK
STREET ADDRESS	506 E. HIGHLAND STREET	1.3 STREET ADDRESS	4259 CRISTANO ROAD
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	1.4 CITY-ST-ZIP	JACKSONVILLE, FL 32244
TITLE	DV	2.1 TITLE	DV <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURPHEY, SALLY	2.2 NAME	ALLYN ANNA BELLE
STREET ADDRESS	506 E. HIGHLAND STREET	2.3 STREET ADDRESS	4259 CRISTANO ROAD
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32244
TITLE	DST	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARKLEY, KRISTINE	3.2 NAME	
STREET ADDRESS	11 NE 20TH CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE	DTS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARKLEY, GEORGE H KIP	4.2 NAME	
STREET ADDRESS	11 NE 20TH CT	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	4.4 CITY-ST-ZIP	
TITLE	DV	5.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GATLIN, JOANN	5.2 NAME	
STREET ADDRESS	101 WEST 2ND AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	WINDERMERE FL	5.4 CITY-ST-ZIP	
TITLE	DV	6.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GATLIN, ROGER	6.2 NAME	
STREET ADDRESS	101 WEST HIGHLAND ST.	6.3 STREET ADDRESS	
CITY-ST-ZIP	WINDERMERE FL	6.4 CITY-ST-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]* 2/4/98 954/784-8307

CFR2E037 (10/97)