FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N41276

(9)

CHILD HEALTH ASSISTANCE PROJECT, INC. Principal Place of Business Mailing Address							
rincipal Plac	e of Business	Mailing Address			1 104(115) 511 51301 11030 11011 10011	i Ares Minsi Aibil Aidie minsi Ai	IPH GIBIL MAC
% G. NEAL WIGGINS 809 N. STONE ST. DELAND FL 32720		% G. NEAL WIGGINS 809 N. STONE ST. DELAND FL 32720-3255					
					3. Date Incorporated or Qualified 12/13/1990	3a. Date of Last R 05/01/19	eport 96
Principal P	lace of Business	2a. Mailing Address 26			4. FEI Number 59-3044960	 	plied For t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	Additional
City & State	0	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
Z _I p]	Country 25	Ζ(ρ [29]	30 Cou	ntry	This corporation has liability for Florida Statutes		
	9. Name and Address of Curi	<u>- 11</u>	1001		10. Name and Address of New Ro		
				B1 Name		<u></u>	
WIGGINS, G. NEAL				82 Street Add	ress (P.O. Box Number is Not Acceptable)		
809 N. STONE ST. DELAND FL 32720				83			
				84 City			Code
agent La	to the provisions of Sections 617.0 egistered agent, or both, in the St m familiar with, and accept the ob	ingationa of, occident or 11,0000, 1	ionide Oldi	U (00.			
agent La GNATURE 2.	Signature, typed or probled name of registered OF FICERS A	agent and tute if applicable (NO	TE: Registered	d Agent signature req	juired when reinstating) ADDITIONS/CHANGES TO OFF1	DATE CERS AND DIRECTOF	3S IN 12
GNATURE	Signature, typed or juriled name of registered OFFICERS A	agent and title if applicable (NO	TE: Registered	d Agent signature req	juired when reinstating)	DATE	
GNATURE .	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL	agent and tute if applicable (NO	TE: Registered	3 Agent signature req	juired when reinstating)	DATE CERS AND DIRECTOF	IS IN 12
GNATURE - LE	Signature, typed or justed name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST.	agent and tute if applicable (NO	13. 1.1 TI 1.2 N/ 1.3 SI	d Agent signature req ILE IME REET ADDRESS	juired when reinstating)	DATE CERS AND DIRECTOF	IS IN 12
GNATURE	OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL	ageral and tick if applicable (NO AND DIRECTORS DELETE	TE: Registered 13. 1.1 TI 1.2 N/ 1.3 SI 1.4 Ci	J Agent eignature req ILE IME REET ADDRESS TY-ST-ZIP	juired when reinstating)	DATE CERS AND DIRECTOF Change	IS IN 12
GNATURE E ME ME T ADDRESS Y-S1-ZIP E	OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL	agent and tute if applicable (NO	TE: Registered 13. 1.1 TF 1.2 NA 1.3 ST 1.4 CF	J Agent eignature req ILE IME REET ADDRESS TY-ST-ZIP	juired when reinstating)	DATE CERS AND DIRECTOF	IS IN 12
GNATURE LE ME METADDRESS Y-S1-ZIP LE	OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A.	ageral and tick if applicable (NO AND DIRECTORS DELETE	13. 1.1 TI 1.2 N/ 1.3 SI 1.4 CI 2.1 TI	J Agent signature req ILE IME REET ADDRESS TY-ST-ZIP ILE	juired when reinstating)	DATE CERS AND DIRECTOF Change	IS IN 12
GNATURE LE ME AEET ADDRESS Y S1-ZIP LE ME AEET ADORESS	OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE.	ageral and tick if applicable (NO AND DIRECTORS DELETE	13. 1.1 TI 1.2 N/ 1.3 SI 1.4 CI 2.1 TI 2.2 N/ 2.3 SI	A Agent signature requires the state of the	juired when reinstating)	DATE CERS AND DIRECTOF Change	IS IN 12
GNATURE LE ME	OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL	Agent and title if applicable (NO AND DIRECTORS DELETE	TE Registered 13. 1.1 TI 1.2 N/ 1.3 SI 1.4 CI 2.1 TI 2.2 N/ 2.3 SI 2.4 C	J Agent signature requires the standard standards standa	juired when reinstating) ADDITIONS/CHANGES TO OFF!	DATE CERS AND DIRECTOF Change Change	S IN 12 Addit
GNATURE E MS	OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS	ageral and tick if applicable (NO AND DIRECTORS DELETE	13. 1.1 TI 1.2 N/ 1.3 SI 1.4 CI 2.1 TI 2.2 N/ 2.3 SI	A Agent signature requires the state of the	pured when reinstating) ADDITIONS/CHANGES TO OFF!	DATE CERS AND DIRECTOF Change	Addii
ENATURE E ME ME ME T ADDRESS Y-S1-ZIP ME	OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL	Agent and title if applicable (NO AND DIRECTORS DELETE	13. 1.1 17 1.2 N/ 1.3 S1 1.4 C1 2.1 T/ 2.2 N/ 2.3 S1 2.4 C 3.1 T/ 3.2 N/	A Agent signature requires the state of the	Juried when reinstaling) ADDITIONS/CHANGES TO OFFI ADDITIONS/CHANGES TO OFFI Secretary Karen Siebert	DATE CERS AND DIRECTOF Change Change	Addii
GNATURE LE ME ME LE ME LE MH LE LE MH LE LE LE MH LE LE LE ME ME LE LE ME	Signature, typed or juriled name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL	Agent and title if applicable (NO AND DIRECTORS DELETE	13. 1.1 T/ 1.2 N/ 1.3 S1 1.4 C/ 2.1 T/ 2.2 N/ 2.3 S1 2.4 C 3.1 T/ 3.2 N/ 3.3 S1	J Agent signature requires the signature requirement of the signature requ	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change	IS IN 12
GNATURE LE MS REFLADDRESS Y-SI-ZIP LE MH REFLADORESS Y-SI-ZIP LE ME REFLADORESS Y-SI-ZIP	Signature, typed or juriled name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT	Agent and title if applicable (NO AND DIRECTORS DELETE	13. 1.1 T/ 1.2 N/ 1.3 S1 1.4 C/ 2.1 T/ 2.2 N/ 2.3 S1 2.4 C 3.1 T/ 3.2 N/ 3.3 S1	A Agent signature required to the signature	Juried when reinstaling) ADDITIONS/CHANGES TO OFFI ADDITIONS/CHANGES TO OFFI Secretary Karen Siebert	DATE CERS AND DIRECTOF Change Change	Addit Addit
GNATURE LE ME ME LE ME LE ME LE ME LE	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN	agent and title if applicable (NO AND DIRECTORS DELETE DELETE	13. 1.1 17 1.2 N/ 1.3 S1 1.4 C1 2.1 17 2.2 N/ 2.3 S1 2.4 C 3.1 17 3.2 N/ 3.3 S1 3.4. C	A Agent signature requires and the signature requirement of the signature	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change	Addit
GNATURE LE ME ME LE ME	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN 505 E. NEW YORK AVE	agent and title if applicable (NO AND DIRECTORS DELETE DELETE	13. 1.1 II 1.2 N/ 1.3 SI 1.4 CI 2.1 II 2.2 N/ 2.3 SI 2.4 C 3.1 II 3.2 N/ 3.3 SI 3.4 C 4.1 II 4.2 N/	A Agent signature requires and the signature requirement of the signature	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change	Addit Addit
ENATURE E AS SET ADDRESS Y-ST-ZIP E ME SET ADORESS Y-ST-ZIP AE SET ADORESS Y-ST-ZIP E AE SET ADORESS Y-ST-ZIP	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN	agent and title if applicable (NO AND DIRECTORS DELETE DELETE DELETE	13. 1.1 II 1.2 N/ 1.3 SI 1.4 CI 2.1 II 2.2 N/ 2.3 SI 2.4 C 3.1 II 3.2 N/ 3.3 SI 3.4 C 4.1 II 4.2 N 4.3 SI 4.4 CI	A Agent signature requires the signature requirement of the signature	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change Change	Addit
ENATURE E ME ME ME ME ME ME ME ME M	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN 505 E. NEW YORK AVE	agent and title if applicable (NO AND DIRECTORS DELETE DELETE	13. 1.1 II 1.2 N/ 1.3 SI 1.4 CI 2.1 II 2.2 N/ 2.3 SI 2.4 C 3.1 II 3.2 N/ 3.3 SI 3.4 . C 4.1 II 4.2 N 4.3 SI 4.4 CI 5.1 II 5.1 II	A Agent signature requires to the signature requires to the signature requires to the signature requires to the signature requires the signature requirement of t	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change	Addit
ENATURE E MS	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN 505 E. NEW YORK AVE	agent and title if applicable (NO AND DIRECTORS DELETE DELETE DELETE	13. 1.1 II 1.2 N/ 1.3 SI 1.4 CI 2.1 II 2.2 N/ 2.3 SI 2.4 C 3.1 II 3.2 N/ 3.3 SI 4.4 CI 4.1 II 4.2 N 4.3 SI 4.4 CI 5.1 II 5.2 N/	A Agent signature requires to the signature requires to the signature requirement of the signature requ	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change Change	Addit
ENATURE E MS MET ADDRESS Y-S1-ZIP ME MET ADDRESS Y-S1-ZIP ME	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN 505 E. NEW YORK AVE	agent and title if applicable (NO AND DIRECTORS DELETE DELETE DELETE	13. 1.1 II 1.2 N/ 1.3 SI 1.4 CI 2.1 II 2.2 N/ 2.3 SI 2.4 C 3.1 II 3.2 N/ 3.3 SI 3.4 C 4.1 II 4.2 N 4.3 SI 4.4 CI 5.1 II 5.2 N/ 5.3 SI	A Agent signature requires the signature requirements of the signature	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change Change	Addit
GNATURE LE ME	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN 505 E. NEW YORK AVE	AND DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 II 1.2 N/ 1.3 SI 1.4 CI 2.1 II 2.2 N/ 2.3 SI 2.4 C 3.1 II 3.2 N/ 3.3 SI 3.4 C 4.1 II 4.2 N 4.3 SI 4.4 CI 5.1 II 5.2 N/ 5.3 SI 5.4 CI	A Agent signature requires the signature requirements of the signature representation of the signature representation of the signature representation of the signature requirements and signature requirements represented the signature requirements requi	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change Change Change	Addit Addit Addit
ENATURE E MS MET ADDRESS Y-S1-ZIP MET ADDRESS Y-S1-ZIP ME	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN 505 E. NEW YORK AVE	agent and title if applicable (NO AND DIRECTORS DELETE DELETE DELETE	13. 1.1 II 1.2 N/ 1.3 SI 1.4 CI 2.1 II 2.2 N/ 2.3 SI 2.4 C 3.1 II 3.2 N/ 3.3 SI 3.4 C 4.1 II 4.2 N 4.3 SI 4.4 CI 5.1 II 5.2 N/ 5.3 SI	THE AME THEET ADDRESS TY-ST-ZIP THE THEET ADDRESS TY-ST-ZIP THEET ADDRESS TY-ST-ZIP THEET ADDRESS TY-ST-ZIP	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change Change	Addit Addit Addit
GNATURE LE MS HEET ADDRESS LY-SI-ZIP LE ME HEET ADORESS LY-SI-ZIP LE ME ME	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN 505 E. NEW YORK AVE	AND DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 II 1.2 N/ 1.3 SI 1.4 CI 2.1 II 2.2 N/ 2.3 SI 2.4 C 3.1 II 3.2 N/ 3.3 SI 3.4 C 4.1 II 4.2 N 4.3 SI 4.4 CI 5.1 TI 5.2 N/ 5.3 SI 5.4 CI 6.1 II 6.2 N/	A Agent signature requires the signature requ	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change Change Change	IS IN 12
GNATURE LE ME	Signature, typed or juried name of registered OFFICERS A DP WIGGINS, G. NEAL 809 N. STONE ST. DELAND FL DV ZIMMERMAN, MARK A. 431 E. NEW YORK AVE. DELAND FL DS GELMAN, SUSAN 2777 WHITEHURST DELAND FL DT LUDWIG, MARY JEAN 505 E. NEW YORK AVE	AND DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 T/ 1.2 N/ 1.3 SI 1.4 C/ 2.1 T/ 2.2 N/ 2.3 SI 2.4 C/ 3.1 T/ 3.2 N/ 3.3 ST 3.4 C/ 4.1 T/ 4.2 N/ 4.3 SI 4.4 C/ 5.1 T/ 5.2 N/ 5.3 SI 5.4 C/ 6.3 SI	THE AME THEET ADDRESS TY-ST-ZIP THE THEET ADDRESS TY-ST-ZIP THEET ADDRESS TY-ST-ZIP THEET ADDRESS TY-ST-ZIP	Secretary Karen Siebert 1329 Q. Taylor Road	DATE CERS AND DIRECTOF Change Change Change Change	Addit Addit Addit

SIGNATURE:

97 Need LLAYS MO GWEAL WAS INS

901, 730, 1624 Daylime Phone # 0013395

FILED

Mar 19 1997 8:00am

Secretary of State