FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 22, 1999 8:00 am § Secretary of State

03-22-1999 90066 050 ****61.25

DOCL	JMEN	ĮΤ	#	N	44(054	1

1. Corporation Name

A BOND OF LOVE ADOPTION AGENCY, INC.

Principal Place of Business Mailing Address										
1800 SIESTA DR SARASOTA FL 34239 US 1800 SIESTA DR SARASOTA FL 34239 US										
		(0 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -			_	3. Data (nearporated as	Dunifford	<u> </u>	 -,	
2. Principal P	Place of Business 2a. Mailing Address 26					06/24/1991	Znameo * · · *			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			_	4. FEI Number		Apr	olied For	
22		27				65-0307813			Applicable	
–	City & State City & State					5. Certifcate of Status De	5. Certificate of Status Desired Fee Required			
7in	Country	Zip	Cou	ntrv	 .	& Floation Compaign File	nncina			
			30			· -	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be			
· •	9. Name and Address of Curren					10. Name and Address		ed Agent		
	(00.10) 00.01			81	Name					
STOCKHA	M, SUSANILIA			82	Street	Address (P.O. Box Number is No	Acceptable)			
1126 TAR	•									
SARASOT	A FL 34232			83						
	March Control Control (Control Control			84	City			85 Zip C	ode	
office or r	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the obligations of the country of the state	of Florida. Such change was	authorized	ו עם ו	the corp	corporation submits this statement pration's board of directors. I here	t for the numose	of changing its	registered gistered	
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NO	TE: Registered	Agent	t signature r	equired when reinstating)	DATE			
12.		D DIRECTORS	13.			ADDITIONS/CHANGES	TO OFFICERS			
TITLE '	PD	[] DELETE	1.1 TT					☐ Change	☐ Addition	
NAME	STOCKHAM, SUSAN L.		1.2 N							
STREET ADDRESS	1126 TARA VISTA				ADDRESS					
CITY-ST-ZIP	SARASOTA FL	☐ DELETE	1.4 CI 2.1 TV	TY-ST	r-ZIP			Change	Addition	
NAME	D Singleton, Linda		2.2 N						_	
STREET ADDRESS			-		ADDRESS	~ ·		-	-	
CITY-ST-ZIP	SARASOTA FL 34241		2.40	ITY-S	T-ZIP					
TITLE	D	☐ DELETE	3.1 TI	TLE				Change	Addition	
NAME	SIMS, CECIL		3.2 N/	3MA						
STREET ADDRESS	4009 LANCASTER DR		3.3 \$1	REET	ADDRESS					
CITY-ST-ZIP	SARASOTA FL 34241			ITY-S	T-ZIP				☐ Addition	
TITLE	D	☐ DELETE	4.1 TI					☐ Change	Adujuon	
NAME	SHELTON, KEN		4. 2 N							
-	8815 CLIFFDALE DR VALRICO FL 33594				ADDRESS					
CITY-ST-ZIP TITLE	D	☐ DELETE	5.1 TI	7 <u>7-</u> 57 Tle	1-2110	- DHAIRMAN OF B	OARD	Change	Addition	
NAME '	MILLER, KEN		5.2 N			MILLER, KEN		-	l I	
	7605 RICHARDSON RD		5.3 ST	REET	ADDRESS	7605 RICHARDGON	Ro.			
CITY-ST-ZIP:	SARASOTA FL		5.4 CI	TY-SI	r-ZIP	SAAASOTA FL 34				
TITLE : 19		☐ DELETE	6.1 11	TLE				☐ Change	☐ Addition	
	BRADY, LEANN		· 6.2 N/	AME						

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 one attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS 3057 NOVUS CT

SARASOTA FL 34237