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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name

N49149

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PLANNED GIVING COUNCIL OF DADE COUNTY, INC.

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SIGO S DADELAND BLVD. STE 1707 MAMI F1 33156 S. Date Incorporated or Qualified S. Date of Last Paper Color of Last Paper	Principal Place of Business Mailing Address							ENCENDA DIDILARA	
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Suite, Apt. 8, etc.								\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
27							65-0406749		Not Applicable
City & State							5. Certificate of Status Desired		
25								<u>Г</u>	e Required
Zip									
Section Process Statuture Process Statut					ntrv		Added to Fees		
MULLER, CHARLES E. I 9100 S. DADELAND BLVD. STE 1707 MIAMI FL 33156 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes. His above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Sinch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Sinch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or an accept the obligations of Section 617,0502 and 617,1508, Florida Sinthée. SIGNATURE 12. OF FICEPS AND DIRECTORS 13. ACDITIONS OF MARKED DIRECTORS IN 12 12. AMM. SIGNATURE 12. OF FICEPS AND DIRECTORS 13. ACDITIONS OF MARKED DIRECTORS IN 12 14. ACDITIONS OF MARKED DIRECTORS IN 12 15. EVENSKY, HAROLD R 24. SEVILLA AVENUE, 4902 CORAL GABLES FL 33134 D	24								
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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	14. I do bereb	v certify that the information supplied wi	ith this filing is voluntarily furni	shoot and de	200 8		or the exemption stated in Section 110 020	Wid Florida Ct.	doc 16 di

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 appears in Block 12 or Blo

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/96 (305) CGG . 0095