


FILE NOW: FILING FEE IS \$61.25

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May 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N50276** (7)

1. Corporation Name

THE BROWARD COURT ALCOHOL AND SUBSTANCE ABUSE PROGRAMS, INC.



Principal Place of Business 624 SW 1ST AVE. FT. LAUDERDALE FL 33301	Mailing Address 624 SW 1ST AVE. FT. LAUDERDALE FL 33301-2806
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3. Date Incorporated or Qualified 08/07/1992	3a. Date of Last Report 04/04/1996
4. FEI Number 65-0355760	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STONE, JOHN T
624 S.W. 1ST AVENUE
FT. LAUDERDALE FL 33301**

81 Name John C Merwin
82 Street Address (P.O. Box Number is Not Acceptable) 221 Cypress Island Drive
83
84 City Pompano,
85 Zip Code FL 33069

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 *John Merwin* **May 13, 1997**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE TD	<input type="checkbox"/> DELETE	1.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME BROWN, LUCILE		1.2 NAME Mark Skipper	
STREET ADDRESS 2470 SE 7TH DR.		1.3 STREET ADDRESS 315 S. E. 7 St	
CITY-ST-ZIP POMPANO BEACH FL 33062		1.4 CITY-ST-ZIP Ft Lauderdale, FL	
TITLE PD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MERWIN, JOHN C., JR.		2.2 NAME	
STREET ADDRESS 2221 CYPRESS ISLAND DR., #201		2.3 STREET ADDRESS	
CITY-ST-ZIP POMPANO BEACH FL 33069		2.4 CITY-ST-ZIP	
TITLE VD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WALKER, R.F.		3.2 NAME	
STREET ADDRESS 624 S.W. 1ST AVE.		3.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL 33301		3.4 CITY-ST-ZIP	
TITLE SD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PURGER, JOHN		4.2 NAME	
STREET ADDRESS 3080 NE 42 STREET		4.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RICCI, WILLIAM J.		5.2 NAME	
STREET ADDRESS 2924 CENTER AVENUE		5.3 STREET ADDRESS	
CITY-ST-ZIP FORT LAUDERDALE FL		5.4 CITY-ST-ZIP	
TITLE M	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME OLIPHANT, MIRIAM		6.2 NAME	
STREET ADDRESS 600 S.E. 3 AVENUE		6.3 STREET ADDRESS	
CITY-ST-ZIP FT LAUDERDALE FL		6.4 CITY-ST-ZIP	

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 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: *Edwards* **4-18-97** **763-4505**

CR2E037 (9/96)