

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N51104

(0)

1. Corporation Name

ENDEAVOR GROUP HOMES, INC.



308 001 757800

07/26/90-1118-008

44401.25

Principal Place of Business

Endeavor Group Homes, Inc.

~~JOHN L. JERRY~~

8538 NW 29TH DRIVE

CORAL SPRINGS FL 33065

Mailing Address

Endeavor Group Homes, Inc.

~~JOHN L. JERRY~~

8535 N.W. 29TH DRIVE

CORAL SPRINGS FL 33065

US

3. Date Incorporated or Qualified

10/02/1992

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

Endeavor Group Homes, Inc.

Suite, Apt. #, etc.

8535 NW 29th Drive

City & State

Coral Springs Fla.

Zip

33065

Country

USA

2a. Mailing Address

Endeavor Group Homes, Inc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

30

4. FEI Number

65-0367966

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

COHN, L. JERRY

7809 W. COMMERCIAL BLVD.

TAMARAC FL 33351

10. Name and Address of New Registered Agent

81 Name Rosenbloom, Martin S., P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

8220 State Road 84

83 Suite 307

84 City Fort Lauderdale, Florida

FL

85 Zip Code 33324

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

*Martin S. Rosenbloom, P.A.*

(NOTE: Registered Agent signature required when instituting)

DATE

3-7-96

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.5 TITLE

6.6 NAME

6.7 STREET ADDRESS

6.8 CITY-ST-ZIP

6.9 TITLE

6.10 NAME

6.11 STREET ADDRESS

6.12 CITY-ST-ZIP

6.13 TITLE

6.14 NAME

6.15 STREET ADDRESS

6.16 CITY-ST-ZIP

6.17 TITLE

6.18 NAME

6.19 STREET ADDRESS

6.20 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

*Perry, Linda*

*6511 NE 21 St. Way*

*ft. Lauderdale, Fla. 33308*

☒ Change ☐ Addition

*Flader, Janet*

*6562 Boca Del Mar Ave.*

*Apt. 126*

*Boca Raton, Fla. 33443*

☒ Change ☐ Addition

*Jones, Anne L.*

*6510 SW 49th Street*

*Paule, Florida 33314*

☒ Change ☐ Addition

*LANE, Eileen M.*

*2733 NE 37th Dr.*

*ft. Lauderdale, Fla. 33308*

☒ Change ☐ Addition

*Onorati, Gary*

*767 SW State Rd 7 (Suite 13)*

*Margate, Florida 33068*

☐ Change ☐ Addition

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 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:

*Eileen M. LANE, Director*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-96

305-978-6600

15 3-26-96

CR2E037 (12/95)