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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	N92000000426	(8)
1. Corporation Name	1192000000420	O

SEMINOLE COUNTY HEALTHY START COALITION, INC.

City & State City & State City & State 28 City & State City & State City & State City & State 6. Election Cempaign Financing Trust Fund Contribution Added to Fees Zip Country B. This corporation has liability for Intangible tax under s. 199.032,										
SUITE 1111 WINTER PARK FL 32792 2. Principal Parce of Business 12. A Maling Address 2. Principal Parce of Business 13. Surb. Apt. #, etc. 2. Surb. Apt. #, etc. 3. Surb. Apt. #	Principal Place of Business Mailing Address					J a nia Baiah Ba nia Ba nia I	OLDAO ELBIB DALL HODE			
2. Principal Place of Business	SUITE 1111 SUITE 1111									
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Sute, Apr. #, etc. 27	2. Principal Pla	ce of Business						-	1	
27	21 Suito Ant #	i ata					39 3 170724	C Q		
28	22 Suile, Apr. #	, etc.	<u> </u>				Certificate of Status Desired	11		
28	City & State		<u> </u>	<u> </u>			1 1	• •		
DEJU, JORGE 400 W AIRPORT BLVD. SANFORD FL 32773 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids Statutes. 12. Total and accept the objections of Florids. Such drange was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such drange was authorized by the corporation submits this statement for the purpose of changing its registered difficance or registered agent. I am advantage to work of Florids. Florids Statutes. SIGNATURE 12. OFFICERS AND DIFFECTORS 13. AUDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12 14. City 15. AUDITIONS/CHANGES TO OFFICERS NI 12 16. CITY-ST-2P 17. AUDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12 18. AUDITIONS/CHANGES TO OFFICERS NI 12 18. AUDITIONS/CHANGES TO OFFICERS NI 12 19. AUDITIONS/CHANGES TO OFFICERS NI 12 29. AUDITIONS/CHANGES		 	<u> </u>							
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DEJU, JORGE 400 W AIRPORT BLVD. SANFORD FL 32773 B4		y. Name and Address of Current	Hohisteron What		81	Name	ID. Harris Elia Radiose of How I.	- Joint Land		
SANFORD FL 32773	DEJU, JO	RGE			62	Street Ad	ress (P.O. Box Number is Not Acceptable)			
The provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above named corporation submits this statement for the purpose of charging at singletered 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 The provisions of Section 617,0503, Florida Statutes Populated Agent and Statutes Populated Agent ag	400 W AIRPORT BLVD.			•	83			 		
1. Pursuant to the provisions of Sections 617,0502 and 617,1508, Porcide 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 Florids Such change was suincidated by the corporation's board of directors. I hereby accept the appointment as registered agent, I am registered agent, I am registered agent, or both, in the State of Florids Such change was suincidated by the corporation's board of directors. I hereby accept the appointment as registered agent. I am register	SANFUR	U FL 32//3			L	Ctt	·	Test	Zin Code	
or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby scoept the appointment as registered agent. Term familiar with, and accept the obligations of Section 617.053, Froirida Statutes Signature Signatur						,			·	
12.	or registere	ed agent, or both, in the State of Florid	la. Such change was authoriz€	s, the abo d by the o	orp	named corp oration's bo	oration submits this statement for the purporation of directors. I hereby accept the appo	cose of changing intment as registe	its registered office pred agent. I am	
12.	SIGNATURE _		and file it cool ook to	TE: Degistered	LAgen	l pianah en seau	wad when reinstation!	DATE		
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CITY-SI-ZIP LAKE MARY FL 6.4 CITY-SI-ZIP										
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						ŀ				
	14. Ldo hereb	v certify that the information supplied v	with this filing is voluntarily furn				y for the exemption stated in Section 119.	07(3)(k), Florida S	tatutes. 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 order attachment with an address. SIGNATURE: __