FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

Pg 193

1996

DOCUMENT # N9200000483 (9)
1. Corporation Name

PROBATIONER'S EDUCATIONAL GROWTH ADVISORY COUNCIL. INC.

L, INC).					1 1 86 111 8) 818 1816 1 16 11 86 111 68 011	FA NO 33 00 43 00 43 00 4340 144 3 1220
Principal Plac	e of Business	Mailing Address				- 1300MD1 845 4848 144K 80KK 86KK	
7621 LITTLE	E RD	7621 LITTLE RD					
STE 200	DICHEY EL DACEA	STE 200					
US	RICHEY FL 34654	NEW PORT RICHEY F	L 34654			3. Date Incorporated or Qualified	3a. Date of Last Report
	 					11/23/1992	05/01/1995
	lace of Business	2a. Mailing Address		Ī		4. FEI Number	Applied For
Suite, Apt.	# etc	26 Suite Ant # at-				59-3192064	Not Applicable
22		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State	· · · · · · · · · · · · · · · · · · ·		···	6. Election Campaign Financing	\$5.00 May Ba
Zip	Country	28 Zip	T Caucat			Trust Fund Contribution	Added to Fees
24	25	29	Count	y		8. This corporation has liability for in Florida Statutes	tangible tax under s. 199.032, Yes ₩ No
	9. Name and Address of Curre	ent Registered Agent	190			10. Name and Address of New Re	
			8	1 (Name		graciou Agont
	, Brenda j		8		Stroot Addro	ss (P.O. Box Number is Not Acceptable	
	ITTLE RD					55 (F. C. DOX HUMBER IS NOT ACCEPTABLE	9
STE 20			8	3			
NEW P	ORT RICHEY FL 34654		8	4 (City		85 Zip Code
11. Pursuant	to the provisions of Sections 617 050	2 and 617 1500 Florida Ctat 4	- 45	L			
or register familiar wi	red agent, or both, in the State of Flor ith, and accept the obligations of, Sec	rida. Such change was authorize tion 617.0503. Florida Statutes	es, trie above ed by the cor	nar pora	ned corporat ation's board	tion submits this statement for the purp of directors. I hereby accept the appoir	ose of changing its registered office ntment as registered agent. I am
SIGNATURE	•						
40	Signature, typed or printed name of registered age-		TE Registered Ag	0 Y. 5K	gnature required v		DA1E
12. TITLE		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
NAME	PD HUDGE I	DELETE	1 1 TITLE				Change Addition
	TEPPER, JUDGE L 38053 LIVE OAK AVE RM 10	200	1 2 NAME				
STREET ADDRESS CITY-ST-ZIP	DADE CITY FL	06 C	1.3 STREE				
TITLE	DADE OIT FE	DELETE	1.4 CHTY-	S1 - 2	/IP	33525	
NAME	BAREISS, ROBERT A		2.1 TIFLE 2.2 NAME				Change : Addition
STREET ADDRESS	10301 BELLWOOD AVENUE				oncec		
CITY-ST-ZIP	NEW PORT RICHEY FL		2.3 STREE 2.4 CITY		· 1	21/5/	
TITLE	SD	DELETE	31 TITLE	31-1	ZIP	34654	
NAME	DICKSON, NANCY P	— · · · -	32 NAME				Change (Addition
STREET ADDRESS	2368 TALLYHO LANE		3 3 STREE		DRESS :	2401 Hounds Trail	
CITY-ST-ZIP	PALM HARBOR FL		3 4. CITY -			Palm Harbor, FL 3468	3
TITLE	TD	DELETE	4.1 THILE		- 		Change • Addition
NAME	ROBERTS, SUSAN M		4 2 NAME				
STREET ADDRESS	506 SW PINE AVE		4.3 STREE	T ADO	ORESS		
CITY-ST-ZIP	OCALA FL		4 4 CITY -	ST-Z	JIP -	34474	
TITLE	D	DELETE	5 1 TITLE				Change Addition
NAME	BLAND, DOUGLAS M		52 NAME				·
STREET ADDRESS	10031 BRANDYWINE AVE		53 STREE	T ADE	DRESS		
CITY-ST-ZIP	PORT RICHEY FL		5 4 CITY-	ST - 71	IP.	34668-	-1249
TITLE	D	DELETE	61 TITLE				Change Addition
NAME	BRADLEY, NANCY E		6.2 NAME				,
STREET ADDRESS	7825 N DALE MABRY, STE 2	200	6 3 STREE	T ADC	DRESS		
CITY-ST-2IP	TAMPA FL		6.4 CITY-	ST- 21	IP .	33614	

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 certify 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:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR
BRENDA J. GLASS. EXECUTIVE DIRECTOR

01/22/96

813-841-4131

Dayt me Phone #

CR2E037 (12/95)

1996 NONPROFIT CORPORATION ANNUAL REPORT PROBATIONERS' EDUCATIONAL GROWTH ADVISORY COUNCIL, INC. DOCUMENT #N92000000483 (9)

12. OFF	ICERS AND DIRECTORS	• • • • • • • • • • • • • • • • • • • •	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	VD.	TITLE					
	LYNCH, RICHARD P.	NAME					
	1800 MSTREET, N.W	STREET ADDRESS					
	WASHINGTON, DC 20036	CITY-ST-ZIP					
TITLE	MD	TITLE					
NAME	GLASS, BRENDAJ.	NAME					
STREET ADDRESS	7621 LITTLE ROAD, SUITE 200	STREET ADDRESS					
CITY-ST-ZIP	NEW PORT RICHEY, FL 34654	CITY-ST-ZIP					
TITLE	D	TITLE	(X) CHANGE				
NAME	ATTRIDGE, MARY P	NAME	36739 STATE ROAD 52				
STREET ADDRESS	POST OFFICE BOX 674	STREET ADDRESS					
CITY-ST-ZIP	DADE CITY, FL 34297-0674	CITY-ST-ZIP	DADE CITY, FL 33525				
!! E	D	TITLE					
TITLE	AUGUSTINE, DR. ROGER D.	NAME					
NAME	2562 EXECUTIVE CENTER, CIRCLE E	STREET ADDRESS					
STREET ADDRESS	TALLAHASSE, FL 32399-2500	CITY-ST-ZIP					
CITY-ST-ZIP	TALLATINGOU, TE GEOFF CO.	*(*) *	(X) CHANGE				
TITLE	D	TITLE	*				
NAME	BRYAN, DR. VALERIE C.	NAME STREET ADDRESS	FL. ATLANTIC UNIVBLDG. 476, RM. 255				
STREET ADDRESS CITY-ST-ZIP	FLORIDA ATLANTIC UNIVERSITY-ED. 1, ROOM 122 BOCA RATON, FL 33431-0001	CITY-ST-ZIP					
	fy) neu	ETE TITLE					
TITLE	U	NAME					
NAME	DIXON, CAROLYN	STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	283 TROGAN TRAIL TALLAHASSEE, FL 3231 F	CITY-ST-ZIP					
C111-51-21F	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TITLE	(X) CHANG				
TITLE	D	NAME					
NAME	DOUGLAS, JUDGE E VERNON	STREET ADORESS	145 NORTH HERNANDO				
STREET ADDRESS	POST OFFICE BOX 2075	CITY-ST-ZIP					
CITY-ST-ZIP	LAKE CITY, FL 32056-2075	CIII-01-Zii					
TITLE	D	TITLE					
NAME	ELLIS, SUSIEL	NAME ATREET ARROSES					
STREET ADDRESS	BUREAU OF CRIMINAL JUSTICE PROGRAMS TALLAHASSEE, FL 32390-1050	STREET ADDRESS CITY-ST-ZIP					
CITY-ST-ZIP	TALLAHASSEE, FL 32399-1030						
TITLE	D	TITLE					
NAME	FAIR, T. WILLARD	NAME ADDED ADDDESS					
STREET ADDRESS		STREET ADDRESS					
CITY-ST-ZIP	MIAMI, FL 33147	CITY-ST-ZIP					
TITLE	D	TITLE					
TITLE	FARINA, JUDGE JOSEPH P	NAME					
NAME STREET ADDRESS		STREET ADDRESS					
CITY-ST-ZIP	MIAMI, FL 33125	CITY-ST-ZIP					
	•	7171 P					
TITLE	D	TITLE					
NAME	GREEN-POWELL, DR. PATRICIA	NAME STREET ADDRESS					
STREET ADDRESS	FLORIDA A&M UNIVERSITY-1 S.B.I. PLAZA, RM. 327		•				
CITY-ST-ZIP	TALLAHASSEE, FL 32307	CITY-ST-ZIP					
	fyl ne	LETE TITLE					
TITI E	U (v) Dr						
TITLE	· ·	NAME					
TITLE NAME STREET ADDRESS	HANLEY, MARY		;				

* CONTINUED *

Page 3 06 3

1996 NONPROFIT CORPORATION ANNUAL REPORT PROBATIONERS' EDUCATIONAL GROWTH ADVISORY COUNCIL, INC. DOCUMENT *N92000000483 (9)

12.	OFFICERS AND DIRECTORS		13. ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D		*:*: F			
NAME	MARTIN, DR. LYNDARAE D.		TITLE			
STREET ADDRESS	5001 ST. JOHNS AVENUE		NAME STREET ADDRESS			
CITY-ST-ZIP	PALATKA, FL 32177-3897		STREET ADDRESS CITY-ST-ZIP			
TITLE	D					
NAME			TITLE			
STREET ADDRESS	OUTLER, DR. GAY F		NAME			
CITY-ST-ZIP	600 SOUTHEAST THIRD AVE., 11TH FLOOR FT. LAUDERDALE, FL 33301		STREET ADDRESS CITY-ST-ZIP			
TITLE	0					
NAME			TITLE		(X) CHANGE	
STREET ADDRESS	ROBERTS, JUDGE SUSAN L W		NAME			
CITY-ST-ZIP	POST OFFICE BOX 9000, DRAWER J-117 BARTOW, FL 33830-9000		STREET ADDRESS CITY-ST-ZIP	255 NORTH BROADWAY		
TITLE	D	(X) DELETE	TITLE			
NAME	RODGERS, ANITA S.	'UL AFFER	NAME			
STREET ADDRESS	934 NORTH MAGNOLIA, SUITE 104		STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32803-3854		CITY-ST-ZIP			
TITLE	D		TITLE			
NAME	SEALS, JUDGE JAMES		NAME			
TREET ADDRESS	1700 MONROE STREET		STREET ADDRESS			
CITY-ST-ZIP	FT. MYERS, FL 33901		CITY-ST-ZIP			
ITLE	D		TITLE			
IAME	YALDEZ, DANIEL J		NAME			
TREET ADDRESS	4602 NORTH SEMINOLE AVENUE		STREET ADDRESS			
CITY-ST-ZIP	TAMPA, FL 33603		CITY-ST-ZIP			
TITLE	D		TITLE		(X) CHANGE	
HAME	ZAHNER, DR CARLJ		NAME		IN CIMITOL	
TREET ADDRESS	2601 BLAIR STONE ROAD		STREET ADDRESS	212 HAWK MEADOW DRIVE		
ITY-ST-ZIP	TALLAHASSEE, FL 32399-2500		CITY-ST-ZIP	TALLAHASSEE, FL 32312-1552		
ITLE			TITLE	D	(X) ADDITION	
IAME			NAME	BELL, WILSON C.	INJ ADDITION	
TREET ADDRESS			STREET ADDRESS	2601 BLAIR STONE ROAD		
ITY-ST-ZIP			CITY-ST-ZIP	TALLAHASSEE, FL 32399-2500		
ITLE			TITLE	D	(X) ADDITION	
AME			NAME	FREDERICK, MARGARET E.	[m] make i tota	
TREET ADDRESS			STREET ADDRESS	325 WEST GAINES STREET		
ITY-ST-ZIP			CITY-ST-ZIP	TALLAHASSEE, FL 32399		
ITLE			TITLE	D	(X) ADDITION	
AME			NAME	MAYER, DR. ELIZABETH E.		
TREET ADDRESS			STREET ADDRESS	3209 VIRGINIA AVENUE		
ITY-ST-ZIP			CITY-ST-ZIP	FT. PIERCE, FL 34981-9003		
ITLE			TITLE	D	(X) ADDITION	
AME			NAME	NEWELL, JACK		
TREET ADDRESS			STREET ADDRESS	573 STONEHOUSE ROAD		
ITY-ST-ZIP			CITY-ST-ZIP	TALLAHASSEE, FL 32301		
TLE			TITLE	D	(X) ADDITION	
AME			NAME	WELLS, MARY Y.		
AME TREET ADDRESS ITY-ST-ZIP			NAME Street address	WELLS, MARY Y. 283 TROGAN TRAIL		