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May 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N93000000343 (4)**

1. Corporation Name

CHILDREN OF JESUS FOUNDATION, INC.



Principal Place of Business

Mailing Address

~~8741 S.W. 84TH STREET~~

~~APT. 23~~

~~WEST PALM BEACH FL 33176~~

*14711 SW 112th TERR
MIAMI, FL 33196*

~~8741 S.W. 84TH STREET~~

~~APT. 23~~

~~WEST PALM BEACH FL 33176~~

3. Date Incorporated or Qualified

01/20/1993

4. FEI Number

65-0405076

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VILLEGAS, HENRY A

~~8741 S.W. 84TH STREET~~

~~APT. 23~~

~~WEST PALM BEACH FL 33176~~

*14711 SW 112th TERR
MIAMI, FL 33196*

81 Name

VILLEGAS, Henry A.

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

14711 SW 112th TERRACE

83

84 City

MIAMI

FL

85 Zip Code
33196

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

Henry A. Villegas

Henry A. Villegas

4-15-98

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	VILLEGAS, HENRY A	
STREET ADDRESS	1435 WILDERNESS ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, ARNOLDO REV.	
STREET ADDRESS	13517 LA MIRADA CIRCLE	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	HOBBS, WILLIAM	
STREET ADDRESS	2400 WARE DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	VILLEGAS, Henry A.	
1.3 STREET ADDRESS	14711 SW 112th TERRACE	
1.4 CITY-ST-ZIP	MIAMI, FL 33196	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	SOLANO, FRANCISCO "FRANK"	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	9370 SW 87th AVE	
3.3 STREET ADDRESS	APT S-2	
3.4 CITY-ST-ZIP	MIAMI FL 33176	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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:

Henry A. Villegas

4/6/98

305-273-6001

CR2E037 (10/97)