## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N93000002541

1. Corporation Name

THE SAFE PLACE, INC.

Principal Place of Business

Mailing Address

3220 13TH ST. E. BRADENTON FL 34208

P.O. BOX 1196 BRADENTON FL 34206

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90102 020 \*\*\*\*70.00

399459 · 90102 · 250



	lace of Business	2a. Mailing Address		5. Date incorporated of Qualified	
21 130		26		06/07/1993	1 1
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		<u> </u>	Not Applicable
City & State	enton FL	City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 May Be
24 34 C	205 25 Manatee	29 3	0	Trust Fund Contribution	Added to Fees
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	J Agent
			81 Name	that shorter	
SHEA RO	SEMARY R		82 Street	Address (P.O. Box Number is Not Acceptable)	
3220 1311			-   -   -	407 Draig Blud	
	ON FL 34208		83		
DIVADENT	ON FE 34200		21 21 2		Tin Code
			84 City	omoderation FI	L 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508. Florida Statutes	. the above-named	corporation submits this statement for the ournose of	of changing its registered
office or r	egistered agent, or both, in the State of	Florida. Such change was aut	norized by the corpo	oration's board of directors. I hereby accept the appoint	ointment as registered
agent. I a	m ramiliar with, and accept the obligation	ons or, Section 617.0503, Florid	a şiaiules.	11/19/09	
SIGNATURE	Signature, typed or printed name of registered agent a	MULL AIOTE: B	egistered Agent signature re	equired when reinstating)	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	SD	☐ DELETE	1.1 TITLE		☐ Change ☐ Additio
NAME	BENEDICT, DAVID	_	1.2 NAME		
			1.3 STREET ADDRESS		
STREET ADDRESS	3220 13TH ST. E.				
CITY-ST-ZIP	BRADENTON FL 34208	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Additio
TITLE	VD.				C cuango C
NAME	LYNN, JANET.		2.2 NAME		
STREET ADDRESS	1611 12TH AVE W		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL	F/or exe	2.4 CITY-ST-ZIP	2	☐ Change ☐ Additio
TITLE	PD	DELETE	3.1 TITLE	PD A Hi	☐ Change ☐ Additio
NAME	SHEA; ROSEMARY		3.2 NAME	shorter, Patti 4407 Drake Blud	
STREET ADDRESS	3220 13TH ST. E.		3.3 STREET ADDRESS	4407 Drake Broce	
CITY-ST-ZIP	BRADENTON FL 34208		3.4. CITY-ST-ZIP	Bradenton FL 34203	
TITLE		DELETE	4.1 TITLE		Change Additio
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 ÇITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Additio
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Additio
NAME		<del>_</del>	6.2 NAME		
	STREET TO THE SECURITY		6.3 STREET ADDRESS		
	MATE CANTA		6.4 CITY-ST-ZIP		
CITY ST-ZIP	반 또는 概		0.4 OH 1-31-24F		

14... 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/99

Daytime Phone #

7. (11/98).