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Apr 17 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N93000003777 (0)

1. Corporation Name

HOME SAFE OF PALM BEACH COUNTY, INC.

Principal Place of Business

Mailing Address

401 N DIXIE HWY
W PALM BCH. FL 33401-4209

401 N DIXIE HWY
W PALM BCH. FL 33401-4209



3. Date Incorporated or Qualified
08/16/1993

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 2840 6th Avenue South
Suite, Apt. #, etc.

26 2840 6th Avenue South
Suite, Apt. #, etc.

4. FEI Number
65-0443247

Applied For
Not Applicable

22 City & State
23 Lake Worth, FL

27 City & State
28 Lake Worth, FL

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24 33461-4729 25 Palm Beach

29 33461-4729 30 Palm Beach

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VANWAGONER, MIKE
401 N. DIXIE HIGHWAY
WEST PALM BEACH FL 33401

81 Name

Suzanne Turner

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

2840 6th Avenue South

83

84 City

Lake Worth

FL

85 Zip Code
33461

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 obligation of, Section 617.0503, Florida Statutes.

SIGNATURE

Suzanne Turner
Suzanne Turner, Chief Executive Officer

2/27/97

DATE

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

OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME ABRAMSON, LAWRENCE M
STREET ADDRESS 1860 FOREST HILL BLVD., SUITE 200
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE D ☐ DELETE
NAME ANSTIS, JAMES H
STREET ADDRESS ARCHITECTURE 4, 225 SOUTHERN BLVD.
CITY-ST-ZIP WEST PALM BEACH FL 33405

TITLE D ☐ DELETE
NAME BAER, KAREN V
STREET ADDRESS 901 NORTHPOINT PARKWAY, SUITE 204
CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE D ☐ DELETE
NAME CURCIO, CHARLES P JR.
STREET ADDRESS TIRE KINGDOM, 2001 CONGRESS AVENUE
CITY-ST-ZIP RIVIERA BEACH FL 33404

TITLE D ☐ DELETE
NAME DAVIS, JORDAN K M.D.
STREET ADDRESS 7601 WOOD DUCK DRIVE
CITY-ST-ZIP BOCA RATON FL 33434

TITLE D ☐ DELETE
NAME DOMINICIS, GEORGE
STREET ADDRESS FLO-SUN, INC., 316 ROYAL POINCIANA PLAZA
CITY-ST-ZIP PALM BEACH FL 33480

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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: *Suzanne Turner*

Suzanne Turner, Chief Executive Officer

2/27/97

DATE

561-433-0068 38006

CR2E037 (9/96)

1997 BOARD OF DIRECTORS

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