

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 11 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 # **N94000001722 (7)**

1. Corporation Name

NEW BEGINNINGS GREYHOUND ADOPTION, INC.



Principal Place of Business 4400 SW 95 AVENUE DAVE FL 33328-2420 US	Mailing Address 4400 SW 95 AVENUE DAVE FL 33328-2420 US
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3. Date Incorporated or Qualified

04/07/1994

4. FEI Number

65-0402357

Applied For

Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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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

**HELLER & BARNETT CORPORATE SERVICES
1133 S. UNIVERSITY DRIVE
STE. 202
PLANTATION FL 33324**

81 Name

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

83

84 City

FL

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 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	DP <input type="checkbox"/> DELETE
NAME	RASKIN, DEBRA J
STREET ADDRESS	4400 SW 95 AVENUE
CITY-ST-ZIP	DAVE FL
TITLE	DVP <input checked="" type="checkbox"/> DELETE
NAME	DAVISSON, JO
STREET ADDRESS	4191 SW 6TH PLACE
CITY-ST-ZIP	PLANTATION FL 33317
TITLE	SD <input checked="" type="checkbox"/> DELETE
NAME	BENASHSKY, MAUREEN
STREET ADDRESS	5733 SW 26TH STREET
CITY-ST-ZIP	WEST HOLLYWOOD FL 33023
TITLE	<i>Amason</i> <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	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	FREDA GIMPEL
1.3 STREET ADDRESS	1050 SE 7 CT
1.4 CITY-ST-ZIP	DANA FL 33004
2.1 TITLE	DS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	PETER GIMPEL
2.3 STREET ADDRESS	1050 SE 7 CT
2.4 CITY-ST-ZIP	DANIA FL 33004
3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MICHAEL HELLER
3.3 STREET ADDRESS	1214 N. UNIVERSITY DR.
3.4 CITY-ST-ZIP	PLANTATION FL 33322
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:

(Signature)

3/2/98

CR2E037 (10/97)