

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N94000004494 (0)  
1. Corporation Name

BOYS HOPE OF FLORIDA, INC.



Principal Place of Business

4300 TALLEYRAND AVE.  
JACKSONVILLE FL 32206

Mailing Address

4300 TALLEYRAND AVE.  
JACKSONVILLE FL 32206

3. Date Incorporated or Qualified  
09/13/1994

3a. Date of Last Report  
03/22/1995

4. FEI Number  
43-1691062

Applied For  
Not Applicable

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

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

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

PISTONE, ANTHONY  
4300 TALLEYRAND AVE.  
JACKSONVILLE FL 32206

81. Name

LANAHAN, MICHAEL J

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 provisions of, Section 617.0503, Florida Statutes.

SIGNATURE

Michael J. Lanahan, Chairman/Director

01/31/96

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
SHERIDAN, PAUL G  
4300 TALLEYRAND AVE.  
JACKSONVILLE FL 32206

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
GUIDI, DENNIS E  
4300 TALLEYRAND AVE.  
JACKSONVILLE FL 32206

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
PISTONE, ANTHONY  
4300 TALLEYRAND AVE.  
JACKSONVILLE FL 32206

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

☐ DELETE

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

D  
Mary Pitocchelli  
2827 Forest Mill Lane  
Jacksonville, FL 32257

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

D  
Dennis E. Guidi  
1837 Hendricks Avenue  
Jacksonville, FL 32207

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

D  
Michael J. Lanahan  
2014 East Adams Street  
Jacksonville, FL 32201

☒ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

Deposited by Bank

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael J. Lanahan

01/31/96

Date

(904) 356-0721

Daytime Phone #

CR2E037 (12/95)

13-20-1996