FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 12:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N94000005442 (8)**

1. Corporation Name

CONCERNED PARENTS, INC.

Principal Place of Business	Mailing Address
250 AUSTRALIAN AVENUE SOUTH SUITE 1010 WEST PALM BEACH FL 33401	250 AUSTRALIAN AVENUE SOUTH SUITE 1010 WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/21/1994
3a. Date of Last Report:
4. FEI Number: 65-0571700 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
21 One Clearlake Centre Ste1010	26 One Clearlake Centre Ste 1010	
Suite, Apt. #, etc. 22 250 S. Australian Ave.	Suite, Apt. #, etc. 27 250 S. Australian Ave.	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
City & State 23 West Palm Beach, FL	City & State 28 West Palm Beach, FL	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
Zip / County 24 33401-5012 / 25	Zip / County 29 33401-5012 / 30	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
GELFAND, MICHAEL J 250 AUSTRALIAN AVENUE SOUTH SUITE 1010 WEST PALM BEACH FL 33401	81 Name: Michael J. Gelfand 82 Street Address (P.O. Box Number is Not Acceptable): One Clearlake Centre, Suit1010 83: 250 South Australian Avenue 84 City: West Palm Beach FL 85 Zip Code: 33401-5012

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE 4/25/95
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	GELFAND, MICHAEL J	12 NAME	
STREET ADDRESS	250 AUSTRALIAN AVENUE SOUTH, SUITE 1010	13 STREET ADDRESS	
CITY ST ZIP	WEST PALM BEACH FL 33401-5012	14 CITY ST ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	DUGAN, MARIE	22 NAME	
STREET ADDRESS	1050 NE 3RD AVENUE	23 STREET ADDRESS	
CITY ST ZIP	BOCA RATON FL 33432	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	KIMBALL, MARY	32 NAME	
STREET ADDRESS	1003 NW 6 TERRACE	33 STREET ADDRESS	
CITY ST ZIP	BOCA RATON FL 33486	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

AM 5/1/95

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)(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: _____ 4/25/95 407-655-8224
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
MICHAEL O. GELFAND

0010874