NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90051 036 ****61.25

1. Corporation	MENT# N95000	000991			}					
PARENTS WITHOUT PARTNERS OSCEOLA COUNTY CHAPTER 1335, INC.						334104				•
Principal Place	of Business	Mailing Address								
P.O. BOX 450983 P.O. BOX 450983						A LEBATTION CON CREDIT RANGE AND A CREAT AND A	n 11 10 11 1	II 021) 	EE (1911 188)	
KISSIMMEE FL		KISSIMMEE FL 34745-0983								
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2. Principal Pi	ace of Business	2a. Mailing Address				3. Date Incorporated or Qualifed			[İ
21	<u> </u>	26				02/28/1995 4. FEI Number		I · lan	lied For	. !
Suite, Apt. :	#, etc.	Suite, Apt. #,-etc.	•••			65-0637253			Applicable	
City & State		City & State	<u> </u>	. <u> </u>			<u>.=</u>	\$8.75 A		
23	y	28				5. Certificate of Status Desired	J 	Fee Rec	quired	
Zip	Country	Zip	Cou	ntry		6. Election Campaign Financing	<u> </u>	\$5.00		ľ
24	25		30			Trust Fund Contribution	.	Added to	Fees	
	9. Name and Address of Current	Registered Agent		81 Name		10. Name and Address of New Reg	Stored A	Beur		}
				l I '	Wis	neski, Carl				
YOUNG, TINA		82 Stre			1993	s (P.O. Box Number is Not Acceptable 9 Welson Rd.	•}			
13546 SUMMERTON DR				83	- ,					ŀ
OHLANDO) FL 32824			-				85 Zip C	ode	
				84 City O	rla	ndo	<u>FL</u>	325		
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statute	s, the a	bove-named	corpor	ration submits this statement for the pur 's board of directors. I hereby accept the	pose of c e appoint	hanging its : Iment as reg	egistered istered	
office or n agant. I a	egistered agent, or both, in the State of m familiar with, and accept the bligati	ions of, Section 617.0503, Flori	da Stat	utes.	n auco	a sound of on occording to the pro-	1-11			
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						A	DATE			1 00
	Signature, typed or printed nettle of registered agent OFFICERS ANS		Registers:	Agent signaturs in	equired v	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND	DIRECTO		蠡
12. TILE	OFFICERS ANI				VP.	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12	(11/98)
12.	OFFICERS ANI	DIRECTORS	13.	TLE		ADDITIONS/CHANGES TO OFFIC				137 (11/98
12. TILE	PD YOUNG, TINA	DIRECTORS	13. 1.1 TI 1.2 N	TLE		ADDITIONS/CHANGES TO OFFIC				2E037 (11/98
12. TITLE NAME	PD YOUNG, TINA	D DIRECTORS DELETE	13. 1.1 TI 1.2 N 1.3 S 1.4 C	TLE NAME TREET ADDRESS TY-ST-ZIP	VP	ADDITIONS/CHANGES TO OFFICE		Change	Addition	CR2E037 (11/98
12. TITLE NAME STREET ADDRESS	PD YOUNG, TINA 13546 SUMMERTON DR. ORLANDO FL 32824 SD	DIRECTORS	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI	TLE NAME TREET ADDRESS TY-ST-ZIP TLE	VP.	ADDITIONS/CHANGES TO OFFICE				- CR2E037 (11/98
12. TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME	PD YOUNG, TINA 13546 SUMMERTON DR. ORLANDO FL 32824 SD TROUSDALE, TED	D DIRECTORS DELETE	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N	TLE AME TREET ADDRESS TY-ST-ZIP TLE	VP.	ADDITIONS/CHANGES TO OFFICE D krania. Mary		Change	Addition	- CR2E037 (11/98
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD YOUNG, TINA 13546 SUMMERTON DR. ORLANDO FL 32824 SD TROUSDALE, TED 720 CELEBRATION AVE APT 12	D DIRECTORS DELETE	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N	TLE TREET ADDRESS TY-ST-ZP TLE TREET ADDRESS	SD Ba 23	ADDITIONS/CHANGES TO OFFICE D krania, Mary Ul Water View Loop		Change	Addition	- CR2E037 (11/98
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12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD YOUNG, TINA 13546 SUMMERTON DR. ORLANDO FL 32824 SD TROUSDALE, TED 720 CELEBRATION AVE APT 12 CELEBRATION FL	D DIRECTORS DELETE DELETE	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C	TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE	VP SD Ba 23 Ki	krania, Mary Ol Water View Loop ssimmee, FL 34743-3		Change	☐ Addition	CR2E037 (11/98
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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 eath; 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:

3/26/99 (407)828-4226