

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000003780 (2)

1. Corporation Name

BETHESDA FAMILY SERVICES FOUNDATION OF FLORIDA, INC.

Principal Place of Business

**28 N.E. 18TH STREET
HOMESTEAD FL 33030**

Mailing Address

**28 N.E. 18TH STREET
HOMESTEAD FL 33030**



3. Date Incorporated or Qualified
08/08/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
65-0614722

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HEUSEN, STEVE V
28 N.E. 18TH STREET
HOMESTEAD FL 33030**

81 Name **Steve VanHeusen**

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

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Steve VanHeusen**

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

(NOTE: Registered Agent's signature required when reinstating)

15 APR 96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **HERBST, DOMINIC P**
STREET ADDRESS **CENTRAL OAK HEIGHTS, RT. 15 SOUTH**
CITY-ST-ZIP **WEST MILTON PA 17886**

1.1 TITLE **D** ☒ Change ☐ Addition
1.2 NAME **Dominic P. Herbst**
1.3 STREET ADDRESS **P.O. Box 210 Route 15 South**
1.4 CITY-ST-ZIP **West Milton, PA 17886**

TITLE **D** ☐ DELETE
NAME **HEUSEN, STEVE V**
STREET ADDRESS **28 N.E. 18TH STREET**
CITY-ST-ZIP **HOMESTEAD FL 33030**

2.1 TITLE **D** ☒ Change ☐ Addition
2.2 NAME **Jerilyn Keen**
2.3 STREET ADDRESS **P.O. Box 210, Route 15 South**
2.4 CITY-ST-ZIP **West Milton, PA 17886**

TITLE **D** ☐ DELETE
NAME **KEEN, JERILYN**
STREET ADDRESS **CENTRAL OAK HEIGHTS, RT. 15 SOUTH**
CITY-ST-ZIP **WEST MILTON PA 17886**

3.1 TITLE **D** ☒ Change ☐ Addition
3.2 NAME **Steve VanHeusen**
3.3 STREET ADDRESS **28 N.E. 18th St.**
3.4 CITY-ST-ZIP **Homestead, FL 33030**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE **D** ☐ Change ☒ Addition
4.2 NAME **Joseph Ramirez**
4.3 STREET ADDRESS **26467 SW. 126th Avenue**
4.4 CITY-ST-ZIP **Homestead, FL 33032**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE **D** ☐ Change ☒ Addition
5.2 NAME **Dr. Margaret Peters**
5.3 STREET ADDRESS **325 N.W. 18th St.**
5.4 CITY-ST-ZIP **Homestead, FL 33030**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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: **Steven VanHeusen**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305) 246-2900

Date

Daytime Phone #

CR2E037 (12/95)