FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



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

1996

N95000004817 (1) **DOCUMENT** # 1. Corporation Name

## COMMUNITY PARTNERSHIP WITH CHILDREN, INC.

Principal Place of Business Mailing Address



1901 - 23RD STREET 1901 - 23RD STREET VERO BEACH FL 32960 VERO BEACH FL 32960			)						
						3. Date Incorporated or Qualified 10/09/1995	3a. Date of Las	t Report	
	lace of Business	2a. Mailing Address	Mailing Address			4. FEI Number		Applied For	
21	A	26				65-0630224	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<b>-</b>			5. Certificate of Status Desired		5 Additional Required	
City & State	е	City & State	City & State			6. Election Campaign Financing	_ \$5.0	DO May Be	
23		28	<del></del>			Trust Fund Contribution		ed to Fees	
Zip	Country	Zip		Country		8. This corporation has liability for in		s. 199.032,	
24]	25 9. Name and Address of Curre	29	30	30			L. J Yes □ No		
	5. Name and Address of Curre	it negistered Agent		1 N	ame	10. Name and Address of New Re	gistered Agent		
CARTE	2 52145 14		[	``  '``	arrie				
	R, DAVID M		82 Street Addres			s (P.O. Box Number is Not Acceptable	3)		
	ACHLAND BLVD. BEACH FL 32963		83		<del></del> -				
VERU B	EACH FE 32903		Ľ						
				4 Ci	•		FL !"	ip Code	
11. Pursuant	to the provisions of Sections 617.050;	2 and 617.1508, Florida Statute	s, the above	-nam	ed corporati	on submits this statement for the purp of directors. I hereby accept the appoi	ose of changing its	registered office	
familiar wi	ith, and accept the obligations of, Sec	tion 617.0503, Florida Statutes.	ad by the co	rporati	ion s boaro (	or directors. I hereby accept the appoi	ntment as registere	of agent. I am	
SIGNATURE	<b></b>								
Signature, typed or printed name of registered agent and bt a tapplicable (NOTE Re  12. OFFICERS AND DIRECTORS				egistereo Agent signature required v			DATE		
TITLE	D OFFICERS AN	DELETE	13.			ADDITIONS/CHANGES TO OFFIC			
NAME	BAYLESS, CAROLYN		- 1	1.2 NAME		BASURER, P J. BRACKINS	☐ Change	Addition	
STREET ADDRESS	1901 - 23RD STREET			1.3 STREET ADDRESS		J. BKHCKING			
CITY-ST-ZIP	VERO BEACH FL 32960			1.4 CITY-ST-ZIP		BRO BEACH PL 30	61.0		
TITLE	D	DELETE		2.1 TITLE		en e-neg it ge	Change	Addition	
NAME	BIBOW, ROLF	<del></del>	2 2 NAM				change		
STREET ADDRESS	1901 - 23RD STREET			2 3 STREET ADD					
CITY-ST-ZIP	VERO BEACH FL 32960		2 4 CITY		1				
TITLE	D	DELETE	3 1 TITLE				☐ Change	Addition	
NAME	CARTER, DAVID		3.2 NAM	E					
STREET ADDRESS	1901 - 23RD STREET		3 3 STRE	ET ADDE	RESS				
CITY-ST-ZIF	VERO BEACH FL 32960	·	3 4. DITY	- ST - ZIF	Р				
TITLE	D	DELETE	4.1 TITLE	4.1 TITLE			☐ Change	☐ Addition	
NAME	HOPKINS, SUSAN		4 2 NAM	4 2 NAME				İ	
STREET ADDRESS	1901 - 23RD STREET		4.3 STRE	4.3 STREET ADDRESS					
CITY - ST - ZIF	VERO BEACH FL 32960			4.4 CITY - ST - ZIP					
TITLE	D DINOTON DETTY	DELETE		5.1 TITLE			Change	☐ Addition	
NAME CYPECT ADODESC	LUDINGTON, BETTY A			5.2 NAME					
STREET ADDRESS	1901 - 23RD STREET		5 3 STRE						
CITY-ST-ZIP TITLE	VERO BEACH FL 32960 D	DELETE		5 4 CITY - ST - ZIP 6 1 TITLE			П	<b>—</b>	
NAME	NIGH, BILL	Floctic					Change	☐ Addition	
11/MPIL	INION, DILL		6.2 NAM	t.	1				

VERO BEACH FL 32960 CITY-ST-ZIP 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 cath; 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 13 if changed, or on an attachment with an address.

6 3 STREET ADDRESS

**SIGNATURE:** 

1901 - 23RD STREET

STREET ADDRESS