

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 02, 1999 8:00 am**  
**Secretary of State**

03-02-1999 90048 005 \*\*\*\*61.25

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**DOCUMENT # N95000005149**

1. Corporation Name

**TOGETHER AGAINST GANGS, INC.**

Principal Place of Business

1515 N FEDERAL HWY  
#210  
BOCA RATON FL 33432  
US

Mailing Address

1515 N FEDERAL HWY  
#210  
BOCA RATON FL 33432  
US

144219.90048.15 7 \*



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date incorporated or Qualified

11/01/1995

4. FEI Number

65-0613512

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

9. Name and Address of Current Registered Agent

SACHS, PETER S ESQ.  
SACHS & SAX, P.A.  
301 YAMATO ROAD, SUITE 4150  
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

TITLE VPD  
NAME MCCARTHY, MARY  
STREET ADDRESS 301 N OLIVE AVE  
CITY-ST-ZIP W PALM BEACH FL  
☒ DELETE

TITLE D  
NAME SACHS, PETER S  
STREET ADDRESS % 301 YAMATO ROAD, SUITE 4150  
CITY-ST-ZIP BOCA RATON FL 33431  
☒ DELETE

TITLE TD  
NAME GERONEMUS, LEONARD A  
STREET ADDRESS 301 YAMATO RD, 3100  
CITY-ST-ZIP BOCA RATON FL  
☐ DELETE

TITLE D  
NAME LEHMAN, RICHARD S  
STREET ADDRESS 2600 N. MILITARY TRAIL  
CITY-ST-ZIP BOCA RATON FL  
☒ DELETE

TITLE PD  
NAME TURESKY, LEONARD  
STREET ADDRESS 5301 N FEDERAL HWY. #160  
CITY-ST-ZIP BOCA RATON FL  
☐ DELETE

TITLE SD  
NAME PARKER, NANCY  
STREET ADDRESS 5200 TOWN CENTER CIR, #600  
CITY-ST-ZIP BOCA RATON FL  
☒ DELETE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VPD  
1.2 NAME SCOTT III, ANDREW  
1.3 STREET ADDRESS 100 NW BOCA RATON BLVD  
1.4 CITY-ST-ZIP BOCA RATON FL 33432  
☐ Change ☒ Addition

2.1 TITLE SD  
2.2 NAME POLLACK, ARTHUR  
2.3 STREET ADDRESS 5100 TOWN CENTER CIR, 6th FL  
2.4 CITY-ST-ZIP BOCA RATON FL 33486  
☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP BOCA RATON FL 33431  
☐ Change ☐ Addition

4.1 TITLE D  
4.2 NAME JOHNSON, ART  
4.3 STREET ADDRESS 2900 NE 6 DRIVE  
4.4 CITY-ST-ZIP BOCA RATON FL 33431  
☐ Change ☒ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS 902 CLINT MOORE RD, STE 132  
5.4 CITY-ST-ZIP BOCA RATON FL 33487  
☐ Change ☐ Addition

6.1 TITLE D  
6.2 NAME KRISCHER, BARRY  
6.3 STREET ADDRESS 401 N. DIXIE HWY  
6.4 CITY-ST-ZIP WEST PALM BEACH FL 33401  
☐ Change ☒ Addition

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)