**FILE NOW: FILING FEE IS \$61.25** 

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary o late , 🔦

DIVISION OF CORPORATIONS

DOCUMENT #

N9500000526/

LABELLE PROGRAM CENTER, INC.

FILED Sep 02 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address											
,											
SOUT	H 29	POST	OFFICE BOX	214							
ı	'		BELLE, FL 33975			3. Date incorporated or	Qualified	3a. Date of	Last F	Report	
<b>&gt;</b>							November, 199	5	1		r, 1996
	lace of Business	2a.	. Mailing Address				4. FEI Number				oplied For
21 Sout		26	P. O. Box	214			65-0623	642	<b>.</b> [	N	ot Applicable
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.				5. Certificate of Status D				Additional
22		27					- Commodio of Status B		F	ee R	equired
City & State  23 LaBelle. F1 33935			City & State				6. Election Campaign Financing \$5.00 May Be				
23 LaBe. Zip	11e, F1 33935 Country	28	LaBelle, $F$		75. Jntry	,	Trust Fund Contribution				to Fees
24	25	29	2.μ	30	arttry	1	8. This corporation has li				199.032
-71	9. Name and Address of Curren		tered Anent	30	T		Florida Statutes  10. Name and Address (		Yes No		
	Transfer of the state of the st		ACTOR ABOTA		81	Name	10. Hallie alla Address (	I INOM HOS	Alstered waent		
Pat 1	Bedingfield					ļ			<del></del>		
P. O. Box 214, 330 Belmont Street					82	Street #	Address (P.O. Box Number is Not	Acceptab	le)		
LaBelle, Fl 33975			outeer.	83							
Lauc.	TTG										
					84	City			FL 85	Zip	Code
11. Pyrsuant	to the provisions of Sections 617.050.	2 and 6	17.1508, Florida Statu	ites, the a	bove	e-named i	corporation submits this statemer	it for the p	veces of shap	aina il	s registered
onice or r	egistered agent, or both, in the State in tamiliar with, and accept the obliga	of Florid	oa. Such change was	authorize	d by	/ the corp	poration's board of directors. I her	эру ассер	t the appointme	≨nt as	registered
SIGNATURE	12.00	- O-C	)	ionoa ola	10100	<i>3</i> .			0.4.0	7 -	1
SIGNATURE			if applicable (NO	TE: Registere	d Ago	ent signature	required when reinstating)		DATE	<u> </u>	
12.	OFFICE AS AN	DIREC	CTORS	13.			ADDITIONS/CHANGES	TO OFFIC	ERS AND DIRE	CTOF	RS IN 12
THLE	$\mathcal{D}$		DOLETE	11]	TLE				☐ Ci	iange	Addition
NAME	President			1.2 N	AME						
STREET ADDRESS	Pat Bedingfield,	POB	214	1.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	LaBelle, Fl 33935	(33	o Belmonts	1.4 0	TY-S	iT- <b>Z</b> IP					
TITLE	Secretary		☐ DELETE	2.1 TI	TLE				☐ Ct	ange	Addition
NAME	<b>-</b>			2.2 N	AME						
STREET ADDRESS	Betty English	147	o InDolla	238	re i	ADDRESS					
CITY-ST-ZIP	4551 Springview C	TLCI	e'raperre'	r'1 245	7.5	ADDRESS ST-ZIP					
TITLE	D		DELETE	3.1 TI		İ			☐ CF	ange	Addition
NAME	Treasurer,			3 2 N/	4ME	. 1					
STREET ADDRESS	David Basquin			3 3 51	TREET	ADDRESS					
CITY-ST-ZIP	135 Cottage Stree	t, L	aBelle, Fl	3 <b>4</b> . C	<u> TY - S</u>	ST - ZIP					
TITLE			DELETE	: 41 TI	TLE				☐ Ch	ange	Addition
NAME				4 2 N	AME						
STREET ADDRESS				4.3 S1	REET	ADDRESS					
CITY-ST-ZIP				4.4 CI	TY-S	T - ZIP					
TITLE			☐ DELETE	5.1 TI	TLE	1	······································	-	☐ Ch	ange	Addition
NAME				5.2 NA	AME	- !				- (	ひんごり
STREET ADDRESS				5.3 ST	REET	ADDRESS				,	1. V.
CITY-ST-ZIP				5.4 C/	TY-S	T-ZIP					٠ ٧١
TITLE			DELETE	6.1 TI					<u>.</u>	ange	Addition
NAME				6.2 NA	AME	[	20000; -09/03/97		$\mathbb{F}_{n}^{1}\mathbb{Z}_{n}^{2}$		
STREET ADDRESS				6351	REET	ADDRESS	~U3/U3/3/1	0105	31U21		
CITY-ST-ZIP				6.4 CI			***61.25				
MA Lela hazak	and the state of t	Sel. ab.	e Clara da caractera d	4			1.11.5	- 0:			

14. I do 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.

appears in Block 12 to Block is it changed, or off an attachment with an additi

at Bedingfield 8-4-9-

279-144 202