

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000005423 (7)

1. Corporation Name

FAMILIES WITH LOVED ONES IN PRISON, INC.



Principal Place of Business

710 FLANDERS AVE.
DAYTONA BEACH FL 32114

Mailing Address

710 FLANDERS AVE.
DAYTONA BEACH FL 32114

2. Principal Place of Business

21 F.L.I.P.

Suite, Apt. #, etc.

22 710 FLANDERS AVE

City & State

23 DAYTONA BEACH, FL

Zip

24 32114

Country

25 VOL

2a. Mailing Address

26 F.L.I.P.

Suite, Apt. #, etc.

27 710 FLANDERS AVE

City & State

28 DAYTONA BEACH, FL

Zip

29 32114

Country

30 VOL

3. Date Incorporated or Qualified

11/15/1995

3a. Date of Last Report

4. FEI Number

59-834 4631

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

ANDERSON, NADINE B
710 FLANDERS AVE.
DAYTONA BEACH FL 32114

10. Name and Address of New Registered Agent

81 Name

NADERSON, NADINE B.

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

710 FLANDERS AVE.

83 710 FLANDERS AVE.

84 City

DAYTONA BEACH FL

85 Zip Code

32114

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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DP
ANDERSON, NADINE B
STREET ADDRESS 710 FLANDERS AVE.
CITY - ST - ZIP DAYTONA BEACH FL 32114

TITLE ☐ DELETE

NAME DVT
CURRIE, ANNA
STREET ADDRESS 610 NORTHERN RD., #103
CITY - ST - ZIP SOUTH DAYTONA FL 32119

TITLE ☐ DELETE

NAME DS
WARD, TRISHA
STREET ADDRESS 610 NORTHERN RD., #103
CITY - ST - ZIP SOUTH DAYTONA FL 32119

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

800001805688

05/02/96-01089-023

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5.2

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96
Date

788-7425
Daytime Phone #

CR2E037 (12/95)