FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

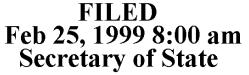
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9600000688

L.A. SOCIAL SERVICE CENTER, INC.

Principal F	Place of	Business
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Mailing Address



02-25-1999 90041 020 ****70.00

#9 BETH STA SUITE 203 LEHIGH ACRE		P.O. BOX 1301 LEHIGH ACRES FL 33970			
2. Principal P	lace of Business	2a. Mailing Address		3. Date incorporated or Qualifed	
21		26	 ,	02/05/1996	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		65-0643862	Not Applicable \$8.75 Additional
City & Stat	e ~	City & State		5. Certificate of Status Desired	Fee Required
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 May Be
24	25	, · · · · · · · · · · · · · · · · · · ·	30	Trust Fund Contribution	Added to Fees
1=41	9. Name and Address of Current			10. Name and Address of New Registered A	jent
			81 Name		1
GOEHLE,	LISA J		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	502 EMPIRE AVE S		2 1. 184		
LEHIGH A	CRES FL 33936		83	1 2 2 3 45	
			84 City	tanes PTV	Zip Code
			a the above named	John Dietz	ig its registered
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State of	it Florida. Such change was all	thorized by the coroc	2420 Atlantic Circle	as registered
agent.la	m familiar with, and accept the obligati	ions of, Section 617.0503, Flori	ida Statutes.		1
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature re	Lehigh Acres, FL. 33936	·
12.	OFFICERS AND		13.	•	CTORS IN 12
TITLE	D/BP	☐ DELETE	1.1 TITLE BP	Gail Abby Smith	Addition
NAME	GARGANO, ROSEMARIE		1.2 NAME	Gail Abby Silitin	
STREET ADDRESS	1300 WOODWARD CT., APT. #6	31	1.3 STREET ADDRESS	2804 Beth Ave.	
CITY-ST-ZIP	LEHIGH ACRES FL 33936		1.4 CITY-ST-ZIP	_ Lehigh Acres, FL. 33971	i Addition
TITLE	D/VP _	☐ DELETE	2.1 TITLE		, (
NAME	MAST, CARL REV.		2.2 NAME	1.00	,
STREET ADDRESS	1300 WOODWARD CT., APT. #3	37	2.3 STREET ADDRESS	Mrs. Glema Treer	
CITY-ST-ZIP TITLE	LEHIGH ACRES FL 33936	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	810 Gardenside Ct.	Addition
NAME	D/S	_	3.2 NAME		
STREET ADDRESS	O'BRIAN, CATHY 1140 LEE BLVD.		3.3 STREET ADDRESS	Lehigh Acres, FL. 33936	į
CITY-ST-ZIP	LEHIGH ACRES FL 33936		3.4. CITY-ST-ZIP	_ ~~	اـــــــــ د
TITLE	D/T	☐ DELETE	4.1 TITLE	$-\beta m_{\text{Mr. Lee Downs}} $	Addition
NAME	HODDER, CAROLE		4. 2 NAME	2701 Lee Blvd.	
STREET ADDRESS	1300 WOODWARD CT., APT. #8	36	4.3 STREET ADDRESS	Lehigh Acres, FL. 33936	, '
CITY-ST-ZIP	LEHIGH ACRES FL 33936		4.4 CITY-ST-ZIP	—-) — deligion
TITLE	BM	☐ DELETE	5.1 TITLE	1937 an Smith	Addition
NAME	DOWNS, LEE		5.2 NAME	1100 Duchmore Ave. South	
STREET ADDRESS	2701 LEE BLVD.		5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Lehigh Acres, FL. 33936	, ,
CITY-ST-ZIP	LEHIGH ACRES FL 33936	DELETE	6.1 TITLE	Lehigh Acres, I.E.	Addition
TITLE	BM DODNEY	₽ DELETE	6.2 NAME	B James Fry) au Hiddition
NAME CORECT ADDRESS	SASHER, RODNEY		6.3 STREET ADDRESS	- MINES LIV	1
STREET ADDRESS CITY-ST-ZIP	2106 9TH ST. LEHIGH ACRES FL 33936		6.4 CITY-ST-ZIP	254 Ground Dove Circle	ļ
14. I hereby o	certify that the information supplied with	h this filing does not qualify for	the exemption stated i	in Secti Lehigh Acres, FL. 33936	mation

SIGNATURE:

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section indicated on this annual report or supplemental annual report is true and accurate and that my signature share officer or director of the corporation or the receiver or flustee empowered to execute this report as required 1 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

2-9-99

941-369-6739