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

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 N96000001798 (5) DOCUMENT # 1. Corporation Name

6200 NORTH ANDREWS AVENUE FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309  3. Date Incorporated or Qualified 03/27/1996  3. Date Incorporated or Qualified 03/27/1996  2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc.	PARALYZED VETERANS ASSOCIATION OF FLOHIDA FOUNDA TION, INC.					
## Applied Fire Josoph Fire LAUDERDALE FI. 30009-129  2. Principal Piace of Rusines  2. Making Address  2. Making Address  2. Making Address  3. Date Decorporated or Qualified   3s. Date of Last Report   Applied For   Applied	Principal Place	e of Business	Mailing Address			
2. Principal Place of Business	6200 NORTH AT	NDREWS AVENUE E FL 33309				
Subject Appl						
Suite	<b></b>	ace of Business	2a. Mailing Address			4. FEI Number Applied For
27	<u> </u>					
22    25    29   30   50   50   50   50   50   50   50	22		27	<b>–</b>		L & Continuate of Status Degree
24						
25   28   29   30   Florida Statules   Yes   No   No   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name		T Country		Cours		
LANHAM, MICHAEL F BISCAYNE BUILDING SUITE #1102   82   Street Address (P.O. Box Number is Not Acceptable)   83   Name   19		h	f	-	тy	
LANHAM, MICHAEL F BISCAYNE BUILDING SUITE #1102 19 WEST FLACIER STREET MIAMI FL 33130  11. Parsient to the previousness of Sections 617 0502 and 617 1508 Florida Statutes, the above-amend composation automiss this statement for the purpose of changing its registered affect of control o	<del>4  </del>			1301		
BISCAYNE BUILDING SUITE #1102   19 WeST FLAGLER STREET   MIAMIF   31130   FL	<b></b>		<b>A</b>	6	1 Name	
BISCAYNE BUILDING SUITE #1102   19 WeST FLAGLER STREET   MIAMIF   31130   FL	LANHAM	MICHAEL E			O Charle	A Address (D.C. Day Nivers in New Association
19 WEST FLAGLER STREET MAMM FL 33 130  80 City FL 85 Zip Code  11. Partient to the provisions of Socions 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. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes  SIGNATURI S						at Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33130    Ba				8	3	
11. Pursuant to the provisions of Socions 617,0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, 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 agont. I am familiar with, and accept the obligations of, Section 617,0505, Florida Statutos.  SIGNATURE  SIGNATURE  12. OF FICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  ITHE  VD DEARMAS, PEORO  12. OF FICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  ITHE  VD DEARMAS, PEORO  12. Addition  NAME  DE ARMAS, PEORO  12. Addition  13. STREET ADDRESS  14. ITHE  TREASURER  JERRY D. JONES  936 INTRACOASTAL DRIVE, #703  LAKE PLACID FL 33852  14. INTRE  15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  ITHE  SD DCLETE  11. TITLE  TREASURER  JERRY D. JONES  936 INTRACOASTAL DRIVE, #703  LAKE PLACID FL 33852  14. INTRE  15. STREET ADDRESS  936 INTRACOASTAL DRIVE, #703  LAKE PLACID FL 33852  14. INTRE  15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  ITHE  NAME  RAZZANO, ERNEST  6522 NW 28TH COURT  MARGATE FL 33063  24. ADITY-ST-ZP  MARGATE FL 33063  24. ADITY-ST-ZP  MARGATE FL 33063  24. ADITY-ST-ZP  MONSON, DAVID  DELETE  17. LAUDERDALE, FL 33304  Change Addition  Addition  NAME  NONSON, DAVID  18. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  AND  MONSON, DAVID  18. TREATMORESS  18. TREA				ļ.,	1 6:	leel 7- Oals
SIGNATURE   Sign	ľ			ſ.	1	
SIGNATURE   Sign	11. Pursuant	to the provisions of Sections 617,050	2 and 617.1508, Florida Statut	es, the abo	ve name	ed corporation submits this statement for the purpose of changing its registered
SIGNATURE   Sign	office or r agent. La	egistered agent, or both, in the State m familiar with, and accept the oblig	rot Florida. Such change was a ations of, Section 617.0503, Fli	authorized orida Statu	by the co les.	proporation's board of directors. I hereby accept the appointment as registered
Signature, tyrotic by product deep product and of lego prices and ble depplicative. (MOTE Registrated Applet sognature required when telecosting)   DATE						
TITLE	SIGIVATORE	Signature, typed or printed name of registered age	on: and title if applicable (NOT	E Registered	gent signatul	
DE ARMAS, PEDRO   2652 ABELL ROAD   13 STREET ADDRESS   13 STREET ADDRESS   14 CITY-ST-72P   17 LAUDERDALE, #7 03   13 STREET ADDRESS   14 CITY-ST-72P   17 LAUDERDALE, #7 03   14 CITY-ST-72P   15 LITT-ST-72P   15 LI	<u> </u>					
13 STREET ADDRESS   2652 ABELL ROAD   13 STREET ADDRESS   14 CITY-ST-ZIP   T. LAUDERDALE, FL. 33304   Change   Addition	J J		L DELETE	- 6		TREASURER LI Change Addition
LAKE PLACID FL 33852						JERRY D. JONES
Title						936 INTRACOASTAL DRIVE, #703
RAZZANO, ERNEST   22 NAME	J—					FT. LAUDERDALE, FL 33304
STREET ADDRESS   6523 NW 28TH COURT			LJ OLLEIE			LI Change L. Addition
City-St-ZiP   MARGATE FL 33063	}	·				
TITLE	1					S
MONSON, DAVID   32 NAME   33 STREET ADDRESS   50 NW 19TH STREET #204   33 STREET ADDRESS   50 NW 19TH STREET #204   33 STREET ADDRESS   50 NW 19TH STREET #204   33 STREET ADDRESS   54 NW 19TH STREET #205   54 NW 49TH WAY   4.2 NAME   5.2 NAME   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   5.5 STREET ADDRESS   5.4 CITY-ST-ZIP   5.5 STREET ADDRESS   5.4 CITY-ST-ZIP   5.5 STREET ADDRESS   5.5 STR						Change T Addition
1400 NW 19TH STREET #204   33 STREET ADDRESS   MIAMI FL 33125   34 CITY-ST-ZIP     11TE	(	_				Charge C Xonitron
DITY   ST-ZIP			1			_
TD	1		1			
NAME   COLLETTE, THOMAS E   4.2 NAME			DELETE			Change T Addition
STREET ADDRESS   5408 NW 49TH WAY   4,3 STREET ADDRESS   44 CITY-ST-ZIP   TAMARAC FL 33319   44 CITY-ST-ZIP   TAMARAC FL 33319   44 CITY-ST-ZIP   TAYLOR, PAULA   52 NAME   52 NAME   52 NAME   53 STREET ADDRESS   CITY-ST-ZIP   PEMBROKE PINES FL 33024   54 CITY-ST-ZIP   TILLE   Change   Addition	1		Jan Dell'st			Li Control
TAMARAC FL 33319	í I					
TILLE			•			
NAME	[		DELETE			Change Addition
STREET ADDRESS   2091 NW 98TH TERRACE   5.3 STREET ADDRESS						
CHY-SI-ZIP         PEMBROKE PINES FL 33024         5.4 CHY-SI-ZIP           TITLE         DELETE         61 TITLE           NAME         62 NAME         Change	1 1					s
TIFLE DELETE 61 TIFLE Change Addition  NAME 62 NAME						
NAME 62 NAME		I EMPIRATE I HEATE GOVER	DELETE			Change Addition
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6.4 CITY - ST - ZIP 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 appear 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 colporation of the receiver or trueter 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 attention with an Address.

SIGNATURE:

**FILED** 

Mar 25 1997 8:00am

Secretary of State