

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Aug 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Merthant Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **N96000001866 (0)**

1. Corporation Name

PREVENTION AMERICA, INC.



Principal Place of Business

Mailing Address

~~11734 NO DALE MABRY
TAMPA FL 33618~~

~~11734 NO DALE MABRY
TAMPA FL 33618~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/04/1996

3a. Date of Last Report

2. Principal Place of Business

21 2332 WATERVIEW CT

2a. Mailing Address

26 SAME

4. FEI Number

39 3374772

Applied For

Not Applicable

Suite, Apt. #, etc.

22 PALM HARBOR

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

23 FLORIDA

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

24 34684

Country

Zip

29

Country

30

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~MEEHAN, PATRICK --
11734 NO DALE MABRY --
TAMPA FL 33618 --~~

81 Name

MARK BREINER

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

2332 WATERVIEW CT

83

PALM HARBOR

84 City

FL

85 Zip Code

34684

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

MARK BREINER

7-26-97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE
NAME **MEEHAN, PATRICK**
STREET ADDRESS **C/O 11734 NO DALE MABRY**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE **D** ☒ DELETE
NAME **MEEHAN, KAREN**
STREET ADDRESS **C/O 11734 NO DALE MABRY**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE **D** ☐ DELETE
NAME **BREINER, MARK**
STREET ADDRESS **C/O 11734 NO DALE MABRY**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE **D** ☐ DELETE
NAME **BREINER, SHELLEY**
STREET ADDRESS **C/O 11734 NO DALE MABRY**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE **D** ☒ Change ☐ Addition
1.2 NAME **Barbara Honegger**
1.3 STREET ADDRESS **4118 N. Meadow Circle**
1.4 CITY-ST-ZIP **Tampa, FL 33624**

2.1 TITLE **D** ☒ Change ☐ Addition
2.2 NAME **Les Aron**
2.3 STREET ADDRESS **1041 Sylvia Lane**
2.4 CITY-ST-ZIP **Tampa, FL 33613**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 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.

SIGNATURE

SIGNATURE REQUIRED

7-26-97

813 786 6510

CR2E037 (4/97)