FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

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

APPROVED AND FILED

97 APR 18 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000002801

1. Corporation Name

CONTINUING POSITIVE FUTURES, INC.

Principal Place of Business	Mailing Address
111 Fairview Ave. Fort Myers, FL 33905	14700 Booker T. Washington Blv Apt. 301 Miami, FL 33176

3. Date Incorporated or Qualified: 052896 | 3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 2502B Holton Street	26 2502B Holton Street
22 Suite, Apt. #, etc.: Apt. 201A	27 Suite, Apt. #, etc.: Apt. 201A
23 City & State: Tallahassee, Florida	28 City & State: Tallahassee, Florida
24 Zip: 32310 / 25 Country	29 Zip: 32310 / 30 Country

4. FEI Number: 65-0675044 ☐ 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	10. Name and Address of New Registered Agent
Brown, Yolanda E. 14700 Booker T. Washington Blvd, Apt 301 Miami, FL 33176	81 Name: TANKARD, SUSIE B. 82 Street Address (P.O. Box Number is Not Acceptable): 2502B Holton Street 83 Apt. 201A 84 City: Tallahassee FL 85 Zip Code: 32310

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: Susie B. Tankard — Susie B. Tankard — 4-18-97
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 NAME ALLEN, PORTIA C. STREET ADDRESS 111 Fairview Ave. CITY-ST-ZIP Fort Myers, FL 33905	☐ DELETE	11 TITLE D 12 NAME Allen, Portia C. 13 STREET ADDRESS 14700 Booker T. Washington Blvd. Apt. 301 14 CITY-ST-ZIP Miami, Florida 33176	☒ Change ☐ Addition
TITLE D NAME BROWN, YOLANDA E. Apt 301 STREET ADDRESS 14700 Booker T. Washington Blvd CITY-ST-ZIP Miami, FL 33176	☐ DELETE	21 TITLE D 22 NAME Tracey, Yolanda B. 23 STREET ADDRESS 14700 Booker T. Washington Blvd. Apt. 301 24 CITY-ST-ZIP Miami, Florida 33176	☒ Change ☐ Addition
TITLE D NAME TANKARD, SUSIE B. STREET ADDRESS 2502B Holton St, Apt 201A CITY-ST-ZIP Tallahassee, FL 32310	☐ DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	☐ Change ☐ Addition

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A. Alan 4/18/97

CR2E037 (9/96)

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: Portia C. Allen — April 18, 1997 — 305-253-3574
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Portia C. Allen, President