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May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N96000004364 (3)
1. Corporation Name
VOLUSIA ASSOCIATION FOR HEALTH AND SOCIAL SERVICES, INC.



Principal Place of Business: POST OFFICE BOX 363 DAYTONA BEACH FL 32115
Mailing Address: POST OFFICE BOX 363 DAYTONA BEACH FL 32115-0363

3. Date Incorporated or Qualified: 08/19/1996
3a. Date of Last Report: N/A
4. FEI Number: 59-3414634
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 [X] No

9. Name and Address of Current Registered Agent: THIFALT, GREGORY C, 1420 NEW BELLEVUE AVE. STE 1011, DAYTONA BEACH FL 32114
10. Name and Address of New Registered Agent: DEAN, DIANA, 585 DALEY ST., ORANGE CITY FL 32763

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: Diana Dean
DATE: 3/13/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	THIFALT, GREGORY C 1420 NEW BELLEVUE AVE. STE 1011 DAYTONA BEACH FL 32114	1.1 TITLE: [] Change [] Addition	
TITLE: PD	DEAN, DIANA 585 DALEY ST ORANGE CITY FL 32763	2.1 TITLE: PD	[] Change [] Addition
TITLE: D	HOUSTON, JENNIFER 1335 FLEMING STREET STE 4 ORMOND BEACH FL 32174	3.1 TITLE: T/D	[] Change [] Addition
TITLE: [] DELETE		4.1 TITLE: VP/D	[] Change [X] Addition
TITLE: [] DELETE		4.2 NAME: Ashley Moore Reidinger	
TITLE: [] DELETE		4.3 STREET ADDRESS: 5779 Kendis Ave	
TITLE: [] DELETE		4.4 CITY-ST-ZIP: Pt. Orange FL 32127	
TITLE: [] DELETE		5.1 TITLE: S/D	[] Change [X] Addition
TITLE: [] DELETE		5.2 NAME: Sharon Yates	
TITLE: [] DELETE		5.3 STREET ADDRESS: 3255 S. Atlantic Ave #603	
TITLE: [] DELETE		5.4 CITY-ST-ZIP: Daytona Beach Shores FL 32118	
TITLE: [] DELETE		6.1 TITLE: [] Change [] Addition	
TITLE: [] DELETE		6.2 NAME: [] Change [] Addition	
TITLE: [] DELETE		6.3 STREET ADDRESS: [] Change [] Addition	
TITLE: [] DELETE		6.4 CITY-ST-ZIP: [] Change [] Addition	

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: Diana Dean
DATE: 3/13/97
DAYTIME PHONE: (904) 761-9102

CR2E037 (9/96)