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

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 16 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # N96000004373 (4) CHILDREN IN NEED SOCIETY, INC. Principal Place of Business Mailing Address 2430 NW 107 AVE 2430 NW 107 AVE 3. Date Incorporated or Qualified CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 08/19/1996 4. FEI Number Applied For NOT APPLICABLE Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 6. Certificate of Status Desired 21 Fee Required 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes 🔀 No 28 Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 26 ☐ Yes 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CIROCCO, CONSTANCE 82 Street Address (P.O. Box Number is Not Acceptable) 2430 NW 107 AVE 83 **CORAL SPRINGS FL 33065** 84 City Zip Code 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition NAME CIROCCO, CONSTANCE 1.2 NAME 2430 NW 107 AVE STREET ADDRESS 1.3 STREET ADDRESS **CORAL SPRINGS FL 33065** CITY-ST-ZIP 1.4 CITY-ST-ZIP **VPD** DELETE TITLE 2.1 TITLE Change LORENZO, DOLORES 2.2 NAME STREET ADDRESS 2430 NW 107 AVE 2.3 STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS FL 33065 2.4 CfTY-ST-ZIP TITLE DELETE Addition 3 1 T(T) F NAME LEWIS, GENEVIEVE 3.2 NAME 10777 W. SAMPLE RD #615 2430 NW 107 AVE STREET ADDRESS 3.3 STREET ADDRESS 33065 CORAL SP95 FL **CORAL SPRINGS FL 33065** CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZiP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP TITLE DELETÉ Addition 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I 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 because 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 emperated to execute the 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.