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Jan 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000002093 (9)**

1. Corporation Name

**ST. CHRISTOPHER'S YOUTH AND FAMILY DEVELOPMENT C
ENTER, INC.**

Principal Place of Business

Mailing Address

**318 NW 6TH AVENUE
FORT LAUDERDALE FL**

**318 NW 6TH AVENUE
FORT LAUDERDALE FL**

3. Date Incorporated or Qualified

04/11/1997

4. FEI Number

65-0758978

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**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No **NA**

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**REGISFORD, SYLVANUS FATHER
318 NW 6TH AVENUE
FORT LAUDERDALE FL**

81 Name

DAVIS, MARJORIE

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

83

84 City

FL

85 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 **DAVIS, MARJORIE**

1-6-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **REGISFORD, SYLVANUS FATHER**

STREET ADDRESS **2760 NW 47TH TERRACE**

CITY-ST-ZIP **FT. LAUDERDALE FL 33313**

TITLE **VPD** ☒ DELETE

NAME **DAVID, MARJORIE**

STREET ADDRESS **1713 NW 5TH STREET**

CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **SD** ☐ DELETE

NAME **SANDS, MARY**

STREET ADDRESS **2491 NW 16TH STREET**

CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **TD** ☐ DELETE

NAME **BURROWS, HERBERT**

STREET ADDRESS **3378 NW 18TH COURT**

CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **D** ☐ DELETE

NAME **JONES, TYSON**

STREET ADDRESS **4421 NW 21ST STREET**

CITY-ST-ZIP **LAUDERHILL FL 33311**

TITLE **D** ☐ DELETE

NAME **MORRISON, GWENDOLYN**

STREET ADDRESS **4837 NW 8TH STREET**

CITY-ST-ZIP **PLANTATION FL 33317**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**PRESIDENT
DAVIS, MARJORIE
1213 N.W. 5th Street
FT. LAUDERDALE, FL 33311**

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**WRIGHT, PEARL
840 FIC TREE LN.
PLANTATION, FL 33317**

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 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: **MARJORIE DAVIS**

1-6-98 954 463 3872

CR2E037 (10/97)