FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCU 1. Corporation	MENT # N97000	0002162 (2)			
ST. JOHN HUMAN RESOURCE DEVELOPMENT CORP.				I MERINOL BIÉ CÉRT (SERIE ERITE DELLE REFIE RE	I 88 io (180) (1816 8)(18 July 180)
Daine de la Pire	D. circum	A			
Principal Place of Business Malling Address					. 25112 11621 11618 41112 1161 (661
2000-6 A E ISAAC AVE WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407			107	3. Date Incorporated or Qualified	
11201 11201 0	and the same	WEST THEM DENOTITE 304	W/	04/16/1997	
	•			4. FEI Number 65-0719762	Applied For
2. Principal F	Place of Business	2a. Mailing Address	···· · · · · · · · · · · · · · · · · ·		Not Applicable
21		26 P. O. Box	993	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.	#, etc.	Sulte, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & State		Palm Beach, FL		7. Is this nonprofit corporation a homeowners association?	
Zip	Country	Zip Zip	Country	8. This corporation owes or has paid the	
24	25	29 33480	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registers	d Agent
			81 Name		
			82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
2000-8 A E ISAAC AVE					
WEST PALM BEACH FL 33407			83		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502	and 617,1508. Florida Statutes	s, the above-named co	progration submits this statement for the purpose	of changing its registered
office or r	registered agent, or both, in the State of im familiar with, and accept the obligati	f Florida, Such change was au	ithorized by the corpo	ration's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE	arrianilar vitri, and doopt the obligati	ons of, coolon of 17.0300, 1 for	ida dialutos.		
	Signature, typed or printed name of registered agent		Registered Agent signature re-		
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	
NAME	TYSON, JOSEPH B	☐ beceig	1.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS	3521 W 35TH ST		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	RIVIERA BEACH FL 33404		1.4 DITY-ST-ZIP		
TITLE	DV	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DORSEY, DARRELL A		2.2 NAME	•	· · ·
STREET ADDRESS	1382 N MAGNOLIA DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33401	·	2. 4 CITY-ST-ZIP		
TITLE	DS	M DELETE	3.1 TITLE	DS	Change ☐ Addition
NAME	POWELL, RUTH E		3.2 NAME	McMillian, Barbara	w Dwisso
STREET ADDRESS	1660 W 30TH ST RIVIERA BEACH FL 33404		3.3 STREET ADDRESS	401 Executive Cente West Palm Beach, FL	
CITY-ST-ZIP TITLE	DT DEACH PE 33404	DELETE	3.4. CITY-SI-ZIP 4.1 TITLE	West Faim Beach, Fi	☐ Change ☐ Addition
NAME	DAVIS, JAMES L		4. 2 NAME		CHANGE TO PROBLEM
STREET ADDRESS	6651 HATTERAS DR		4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL 33467		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T agree	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME CTOCCT ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP

4. 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 reports 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: (NOW AND MEN DE CONTROL Joseph B. Tyson, President 3/17/98

CR2E037 (10/97

FILED

Mar 26 1998 8:00am

Secretary of State