

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000002407 (1)**

1. Corporation Name

**CHILDREN'S BENEVOLENT ASSOCIATION OF SOUTH FLORIDA, INC.**

Principal Place of Business

Mailing Address

**417 EAST SHERIDAN ST.  
SUITE 171  
DANIA FL 33004**

**417 EAST SHERIDAN ST.  
SUITE 171  
DANIA FL 33004**

3. Date Incorporated or Qualified

**04/29/1997**

4. FEI Number

**65-0766867**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SOWDEN, RICHARD H  
105 NORTHEAST FIRST COURT  
DANIA FL 33004**

81 Name

**MICHAEL BRAY**

82

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

**2925 PIERCE ST #13**

83

84

City

**HOLLYWOOD**

**FL**

85

Zip Code

**33020**

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

*Michael Bray*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE

NAME **OTCHYCH, MARYANN**  
STREET ADDRESS **713 SOUTHEAST THIRD COURT**  
CITY-ST-ZIP **DANIA FL 33004**

TITLE **D** ☒ DELETE

NAME **THORN, ALEXANDRA K**  
STREET ADDRESS **410 SOUTHEAST 14TH STREET**  
CITY-ST-ZIP **DANIA FL 33004**

TITLE **D** ☒ DELETE

NAME **SOWDEN, RICHARD H**  
STREET ADDRESS **105 NORTHEAST FIRST COURT**  
CITY-ST-ZIP **DANIA FL 33004**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**D**

**MICHAEL BRAY**

**2925 PIERCE ST #13**

**HOLLYWOOD, FL 33020**

**D**

**ELEANOR TITUS**

**1846 DIXIANA ST**

**HOLLYWOOD, FL 33020**

**D**

**DIXIE WOLIN**

**472 SE 14TH ST**

**DANIA, FL 33004**

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:

*Michael Bray*

**4/29/98**

**954-584-7597**

CR2E037 (10/97)