NONPROFIT CORPORATION REINSTAGEMREPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9700006182

FRIENDS OF TEEN COURT, INC.

Principal Place of Business 108 W RICH AVE

DELAND FL 32720

Mailing Address

108 W RICH AVE DELAND FL 32720

FILED

00 APR 24 PM 2:30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

21 57 NICHOLAS COURT  Suite, Apt. #, etc.  City & State City & State ORMOND BEACH, FLORIDA  Zip Country  Country  Zip Country  G. Election Campaign Financing  \$5.00 May Be			On Mailing Address	<del></del>	3. Date Incorporated or Qualifed		
Sulfa, Apt. F. etc.    Sulfa, Apt. F. etc.   Sulfa, Apt. F. etc.   Sulfa, Apt. F. etc.   Papoled Epide   Papol	67 NTC		2a. Mailing Address 57 NICHOLAS CO	OURT	•		
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9. Name and Address of Current Registered Agent  15		Country			6. Election Campaign Financing	\$5.00 May Be	
DISSLER, CHRISTOPHER R  108 W RICH AVE DELAND FL 32720  11. Pursuant to the provisions of Sections 617,0502 and 617,1503. Fiorida Statutes. The above an experiment of the provisions of Sections 617,0502 and 617,1503. Fiorida Statutes. The above an experiment of the provisions of Sections 617,0502 and 617,1503. Fiorida Statutes. The above an experiment of the provisions of Sections 617,0502 and 617,1503. Fiorida Statutes. The above an experiment of the provisions of Sections 617,0503. Fiorida Statutes. The above an experiment of the provisions of Sections 617,0503. Fiorida Statutes. The above an experiment of the provisions of Sections 617,0503. Fiorida Statutes. The above an experiment of the provisions of changing its registered agent, or both, in the State of Florida. Such change was authoraced by the corporations board of interests. Thereby accept the approximent are registered by the corporations board of interests. Thereby accept the approximent are registered of the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authoraced by the corporations board of interests. Thereby accept the approximent are registered of the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authoraced by the corporations board of interests. Thereby accept the approximant are registered office or registered agent, or both, in the State of Florida. Such change was authoraced with remaining above and the registered agent, or both, in the State of Florida. Statutes. The Purpose of CPL/T/OD  12.	32176	25 U.S.A.	29 32176 30	U.S.A.	Trust Fund Contribution		
DISSER, CHRISTOPHER R  108 W RICH AVE  OELAND PL 32720  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 agent, 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 agent, 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 agent, 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, the provisions of Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, the above-named corporation submits this statement for the purpose of changing its registered agent, the above-named corporation submits this statement for the purpose of changing its registered agent, the above-named corporation submits this statement for the purpose of changing its registered agent. The above-named corporation submits this statement for the purpose of changing its registered agent. The above-named corporation submits this statement for the purpose of changing its registered office.  12. OFFICERS AND DIRECTION 100		9. Name and Address of Current I	Registered Agent				
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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 agent. I applications of price or registered agent accept to be supporting the Statute of Florida. Such change was authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I application accept to the supporting the statement for the purpose of changing its registered agent. I application accept to the supporting the supporting agent. I application accept to the supporting accept the appointment as registered agent. I application to the provisions of Sections 617.0502 and 617.1508, Florida Statutes.  12.	DESLER.	CHRISTOPHER R		82 Street	82 'Street Address (P.O. Box Number is Not Acceptable)		
DELAND FL 32720    Salar   City   ORMOND   BEACH   FL   Salar   Salar		108 W RICH AVE					
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SIGNATURE    Companies   Compa	agent. I am tamillar with and accept the Shiremons of Section 617.0503. Florida Statutes:						
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TID.   DELETE   31 TITLE   TD   Change   Addition    NAME   ELKIND, DARREN   32 NAME   RI CHARD J. CAMPUTARO, CPA    STREET ADDRESS   A31 E NEW YORK AVE   33 STREET ADDRESS   220 S. RIDGEWOOD AVENUE   DELAND FL 32720   DELETE   41 TITLE   VD   VD   Change   Addition    NAME   DITSLEAR, CHRISTOPHER R.   42 NAME   KELLIE A. NIELAN    STREET ADDRESS   A4 CITY-ST-ZIP   DELAND FL 32720   A4 CITY-ST-ZIP   ORMOND BEACH, FL    NAME   DITSLEAR, CHRISTOPHER R.   A4 CITY-ST-ZIP   ORMOND BEACH, FL    NAME   DITSLEAR, CHRISTOPHER R.   A4 CITY-ST-ZIP   ORMOND BEACH, FL    STREET ADDRESS   A4 CITY-ST-ZIP   ORMOND BEACH, FL    STREET ADDRESS   A5 STREET ADDRESS   A5 STREET ADDRESS    CITY-ST-ZIP   DELAND FL 32720   DELETE   S1 TITLE    NAME   D   Change   Addition    STREET ADDRESS   ACITY-ST-ZIP   ORMOND BEACH, FL   32176    TITLE   D   DELETE   S1 TITLE    NAME   MACCONNELL, JOHN   S1 STREET ADDRESS    STREET ADDRESS   TO N CHARLIAS    STREET ADDRESS   TO N	STREET ADDRESS						
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NAME NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  101 N WOODLAND BLVD  DELAND FL 32720  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 effect or 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				5.4 CITY-ST-ZIP	ORMOND BEACH, FL 32176		
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indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made unless used in the same l	4.41   1.50   1.00	- tife that the information cumplied with	this filing does not qualify for th	e exemption stated	in Section 119.07(3)(i), Florida Statutes. I further	certify that the information	
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