

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90224 016 ****61.25

DOCUMENT # N98000001281

1. Corporation Name

STONYBROOK NEIGHBORHOOD NETWORK INC.

Principal Place of Business

**1555 MARTIN LUTHER KING BLVD.
RIVIERA BEACH FL 33404**

Mailing Address

**1555 MARTIN LUTHER KING BLVD.
RIVIERA BEACH FL 33404**



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

03/04/1998

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

65-0819563

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BURCH, STEPHANIE
1555 MARTIN LUTHER KING BLVD.
RIVIERA BEACH FL 33404**

81 Name

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

CEOD

☐ DELETE

1.1 TITLE

☐ Change

☐ Addition

NAME

BURCH, STEPHANIE

STREET ADDRESS

1555 MARTIN LUTHER KING BLVD. F-202

CITY-ST-ZIP

RIVIERA BEACH FL 33404

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE

PD

☐ DELETE

2.1 TITLE

☐ Change

☐ Addition

NAME

PLATT, SHIRLEY B

STREET ADDRESS

1555 MARTIN LUTHER KING BLVD. P-207

CITY-ST-ZIP

RIVIERA BEACH FL 33404

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE

VD

☐ DELETE

3.1 TITLE

☐ Change

☐ Addition

NAME

STEPHENSON, JULIA

STREET ADDRESS

1555 MARTIN LUTHER KING BLVD. O-202

CITY-ST-ZIP

RIVIERA BEACH FL 33404

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE

SD

☐ DELETE

4.1 TITLE

☐ Change

☐ Addition

NAME

BROOKS, KEISHA

STREET ADDRESS

1555 MARTIN LUTHER KING BLVD. K-207

CITY-ST-ZIP

RIVIERA BEACH FL 33404

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE

TD

☐ DELETE

5.1 TITLE

☐ Change

☐ Addition

NAME

COLLINS-FERGUSON, MONICA

STREET ADDRESS

1555 MARTIN LUTHER KING BLVD. N-208

CITY-ST-ZIP

RIVIERA BEACH FL 33404

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE

☐ DELETE

6.1 TITLE

☐ Change

☐ Addition

NAME

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, with a power like empowered.

SIGNATURE:

STEPHANIE BURCH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/21/99 (561) 844-9055

CR2E037 (11/98)

0065375