## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000026886 (9)

L'AVENIR INSTITUTE OF PALM BEACH, INC.

Secretary of State

**FILED** 

May 11 1998 8:00am

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Principal Place of Business Mailing Address						
S3S 8. FLAGLER DR.53S S. FLAGLER DR.WEST PALM BEACH FL 33401WEST PALM BEACH FL 33401			DO NOT WRITI	E IN THIS SPACE	:	
				3. Date Incorporated or Qualified 04/07/1994		-
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For
1	26			<u>65-0481316</u>		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	11	.75 Additional see Required
City & State	City & State			6. Election Campaign Financing	\$5	5.00 May Be
3	28			Trust Fund Contribution	A	dded to Fees
Zip Country	Zip	Country		8. This corporation owes or has pa	<b>—</b>	
4 25		30		Personal Property Tax due June		∐ No
g, Name and Address of Curre		81 Nar	<u></u>	10. Name and Address of New Re	gistered Agent	······································
CORPORATION INFORMATION SE	RVICES INC.	IN	"" 20	frome W. Craft		
1201 HAYS ST.		82 Stre		s (P.O. Box Number is Not Acceptal		
TALLAHASSEE FL 32301			<u>52</u>	3 S. Flagler Dr	ine	
		83	<del>\$</del>	•		
					85	Zip Code
		ω	lest 1	ilm Beach	┡┖┆	Zip Code <b>33 40</b> /
11. Pursuant to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	is, the above-nam	ned corpor	ation submits this statement for the r	ourpose of chang	ging its registered
office or registered agent, or both, in the State agent. I am terrifier with, and accept the oblig	o Chlorida, Sugil change was a patitus of, Section of 10505, Flo	utnorized by the c rida Statutes.	corporation	is poard or directors, I hereby acce	pt the appointme	ent as registered
SIGNATURE A grame W.	Craft -	-				
Storature, typed or printed name of registerica ac-	ort and title if appliquele (NOTE	Registered Agent sign	alure required	wher-reinstating)	DATE	
12. OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRE	etors in 12
TITLE DPST	☐ DELETE	1.1 TITLE		PST	<b>™</b> Ch	ange Addition
NAME WHATLEY, JOANNE		1.2 NAME	l w	hatter Joanne		
STREET ADDRESS 2797 IRMA LAKE DR		1.3 STREET ADDRE	ESS 21	56 Union Street	_	
CITY-ST-ZIP W PALM BEACH FL		1.4 CITY - ST - ZIP	W	hatley, Joanne 56 Union Street Est Palm Beach, Fl.	33411	
TITLE	DELETE	2.1 TITLE			☐ Ch	ange Addition
NAME		2.2 NAME				
STREET ADDRESS		2.3 STREET ADDRE	FSS			
CITY-ST-ZIP		2. 4 CITY - ST - ZIP				
TITLE	DELETE	3.1 1ITLE			☐ Ch	ange Addition
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRE	FSS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP		ſ		
TITLE	DELETE	41 TITLE			☐ Ch	ange Addition
NAME		4. 2 NAME	1			
STREET ADDRESS		4.3 STREET ADDRE	500			
CITY-ST-ZIP		4.5 STREET AUUNE				
TITLE	DELETE	5.1 TITLE			☐ Ch	ange Addition
NAME		5.1 VILE 5.2 NAME	1			E Addition
· /						
STREET ADDRESS		5.3 STREET ADDRE	:00			
CITY-ST-ZIP TITLE	DELETE	6.1 TITLE			Ch	ange Addition
					i un	renAc T vannit)QU
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET ADDRES	:SS			
CITY-ST-ZIP	ith this films does not sugar.	64 CITY-S1-ZIP	totod = C:	110 07(0)() 5(	English as a said of	-4 Sh - 1-61
14. I hereby certify that the information supplied w indicated on this annual report or supplementa officer or director of the corporation or the rec	al annual report is true and accu	urate and that my	signature	shall have the same legal effect as i	f made under oa	th: that I am an

4-28-98