PROFIT				
CORPORATION				
ANNUAL REPORT				
1999				



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000026886

L'AVENIR INSTITUTE OF PALM BEACH, INC.

Principal Place of Business	
535 S. FLAGLER DR.	
WEST PALM BEACH FL 33401	

Mailing Address



9912222 111 1:25



535 S. FLAGLER DA. WEST PALM BEACH FL 33401		535 S. FLAGLER DR. West Palm Beach Fl 33:	401	DO NOT IN	/RITE IN THIS SPACE
				3. Date Incorporated or Qualif 04/07/1994	
	Place of Business	2a. Mailing Address		4. FEt Number	Applied For
21		26		65-0481316	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22 City 4 Street		27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financin	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	a. This corporation owes the c	urrent year Inlangible
24	25	29	30	Personal Property Tax.	M∑Yes □No
	9. Name and Address of Cur			10. Name and Address of New	w Registered Agent
CRA	NFT. JEROME W.		81 Na	100 Betsy Mascara)
	SOUTH FLAGLER DRIVE		82 Str	eet Address (P.O. Box Number is Not Acce	ptable)
	ST PALM BEACH FL 33401			860 US HUY 6	<u>ne</u>
7120	TI THEM DENOTITE GOTOT		83	Suite 209	
			84 Cin	North Palm Beach	FL 85 Zip Code 33408
11. Pursuant office or n agent. I a	to the provisions of Sections 607.t egistered agent) or both, in the Sta m familiar with and accept the ob-	3502 and 607.1508, Florida Statute ate of Florida. Such change was au ligations of Section 607.0505, Flori	s, the above name thorized by the c ida Statutes.	ned corporation submits this statement for it corporation's board of directors. I hereby acc	ne purpose of changing its registered polythe appointment as registered
SIGNATURE	Signature, Speci or printed narright registered	gent and tile V applicable. (NOTE)	Registered Agent signs	(unfallering when reinstatus)	DATE / 14/99
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO C	FFICERS AND DIRECTORS IN 12
TITLE	DPST	☐ DELETE	1.0 TITLE	Am	☐ Change ☐ Addition
NAME	WHATLEY, JOANNE		12 NAME	1500 market	て.
STREET ADDRESS	2156 UNION STREET		13 STREET ADDRE	ESS CRATTO ACTEC D	RIVE_
CITY-ST-ZIP	WEST PALM BEACH FL 334	11	14 CITY-ST-ZIP	CRAFT OVANNE 535 S. FLAGLER D WEST PALM BETC	KK 133411
TITLE		☐ DELETE	21 TITLE	- Julian Standard	Change Addition
MAME	1		22 NAME		
STREET ADDRESS			2.3 STREET ADDRES	ESS	
CITY-S1-ZIP	İ		2.4 CITY-ST-2P	····	
TITLE		DELETE	31 TILE		☐ Change ☐ Addition
NAME	ł		3.2 NAME		. - , -
STREET ADDRESS	1		3.3 STREET ADDRE	Eec	
STREE (ADDRESS)			23 STREET PLANT	100	

64 CITY-ST-ZIP 44. 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 60, or on an attachment with an address, with all other like empowered.

41 TILE

4.2 NAME

5.1 TITLE 52 NAVE 5.3 STREET ADDRESS

B. I TITLE

62 NAME 6.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY - ST- ZIP

5.4 CITY-81-ZIP

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

TITLE

MATURE AND TYPED ON PRATTED NAMES OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

DELETE

DELETE

1-14-99 St.1-6593366

CR2E034 (11/98)

___ Addition

Addition

□ Curavõe

Change