

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
May 07, 1999 8:00 am  
Secretary of State

05-07-1999 90168 020 \*\*\*158.75

DOCUMENT # P98000035752

1. Corporation Name  
PARTNERS IN PRIDE, INC.

Principal Place of Business  
9465 85TH PLACE  
VERO BCH FL 32967

Mailing Address  
9465 85TH PLACE  
VERO BCH FL 32967



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
04/20/1998

4. FEI Number  
65-0848976

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TROUTMAN, KAREN  
9465 85TH PLACE  
VERO BCH FL 32967

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 607.0502 and 607.1508, 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 607.0505, 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 PD ☐ DELETE  
NAME TROUTMAN, KAREN  
STREET ADDRESS 9465 85TH PLACE  
CITY-ST-ZIP VERO BCH FL 32967

1.1 TITLE TD ☒ Change ☐ Addition  
1.2 NAME THOMPSON, DIANE  
1.3 STREET ADDRESS 9465 85TH PLACE  
1.4 CITY-ST-ZIP VERO BEACH, FL 32967

TITLE VD ☐ DELETE  
NAME THOMPSON, DIANE  
STREET ADDRESS 9465 85TH PLACE  
CITY-ST-ZIP VERO BCH FL 32967

2.1 TITLE VD ☐ Change ☒ Addition  
2.2 NAME SOULIOTIS, DEE  
2.3 STREET ADDRESS 3790 ALLEN AVENUE  
2.4 CITY-ST-ZIP MICCO, FL 32976

TITLE SD ☒ DELETE  
NAME THOMPSON, PATRICIA  
STREET ADDRESS 6700 37TH ST.  
CITY-ST-ZIP VERO BCH FL 32966

3.1 TITLE SD ☐ Change ☒ Addition  
3.2 NAME HANEY, MICHELLE  
3.3 STREET ADDRESS 3790 ALLEN AVENUE  
3.4 CITY-ST-ZIP MICCO, FL 32976

TITLE TD ☒ DELETE  
NAME UNDERWOOD, KAREN  
STREET ADDRESS 3340 3RD PLACE  
CITY-ST-ZIP VERO BCH FL 32968

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Karen Troutman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/99

561-388-2113  
Daytime Phone #

CR2E034 (11/98)